

2026 ANNUAL PAY RAISE – AGENCY CONTACT INFORMATION FORM

Instructions: Please include contact information for your agency’s point of contact(s) and submit the completed form to the Annual Pay Raise mailbox at Annual.PayRaise@usda.gov. **NFC will only communicate with your agency contacts assigned to this project.** Agency contacts will be responsible for submitting your agency’s processing requirements, table updates, and any issues to ensure that the annual pay raise can be completed to your satisfaction.

| | |
|--|----------------------|
| DEPT CODE/AGENCY CODE | |
| SECTION A: NO CHANGES REQUIRED | |
| <input type="checkbox"/> CHECK IF NO CHANGES TO PRIOR YEAR'S AGENCY CONTACT LIST. If this box is checked, you are done and do not need to complete SECTION B. | |
| SECTION B: INDIVIDUAL CHANGES | |
| CHANGE AGENCY CONTACTS LIST AS INDICATED BELOW. Complete contact information and mark the ADD or DELETE box for each entry. | |
| CONTACT NAME | CONTACT PHONE NUMBER |
| CONTACT EMAIL ADDRESS | CONTACT FAX NUMBER |
| <input type="checkbox"/> CHECK IF PRIMARY CONTACT <input type="checkbox"/> ADD personnel above to the Agency Contacts List. <input type="checkbox"/> DELETE personnel above from the Agency Contacts List. | |
| CONTACT NAME | CONTACT PHONE NUMBER |
| CONTACT EMAIL ADDRESS | CONTACT FAX NUMBER |
| <input type="checkbox"/> ADD personnel above to the Agency Contacts List. <input type="checkbox"/> DELETE personnel above from the Agency Contacts List. | |
| CONTACT NAME | CONTACT PHONE NUMBER |
| CONTACT EMAIL ADDRESS | CONTACT FAX NUMBER |
| <input type="checkbox"/> ADD personnel above to the Agency Contacts List. <input type="checkbox"/> DELETE personnel above from the Agency Contacts List. | |
| CONTACT NAME | CONTACT PHONE NUMBER |
| CONTACT EMAIL ADDRESS | CONTACT FAX NUMBER |
| <input type="checkbox"/> ADD personnel above to the Agency Contacts List. <input type="checkbox"/> DELETE personnel above from the Agency Contacts List. | |
| CONTACT NAME | CONTACT PHONE NUMBER |
| CONTACT EMAIL ADDRESS | CONTACT FAX NUMBER |
| <input type="checkbox"/> ADD personnel above to the Agency Contacts List. <input type="checkbox"/> DELETE personnel above from the Agency Contacts List. | |
| CONTACT NAME | CONTACT PHONE NUMBER |
| CONTACT EMAIL ADDRESS | CONTACT FAX NUMBER |
| <input type="checkbox"/> ADD personnel above to the Agency Contacts List. <input type="checkbox"/> DELETE personnel above from the Agency Contacts List. | |
| CONTACT NAME | CONTACT PHONE NUMBER |
| CONTACT EMAIL ADDRESS | CONTACT FAX NUMBER |
| <input type="checkbox"/> ADD personnel above to the Agency Contacts List. <input type="checkbox"/> DELETE personnel above from the Agency Contacts List. | |