



# U.S. Department of Justice

## *United States Attorney District of Idaho*

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**Mailing Address:**

800 E. Park Blvd, Suite 600  
Boise, ID 83712-7788

Tel: 208/334-1211  
FLU Fax: 208/334-9375  
Civ Div Fax: 208/334-1414  
Crim Div Fax: 208/334-1413  
DTF Div Fax: 208/334-1413

October 16, 2016


Danielle Renee Mroczek  
Assistant Regional Counsel  
Social Security Administration  
Office of the Regional Chief, Region X  
701 Fifth Avenue, Suite 2900 MS/901  
Seattle, WA 98104-7075

RE: SAUSA Appointment

Dear Ms. Mroczek:

Your appointment as a Special Assistant United States Attorney for the District of Idaho is hereby extended. This extension, which is effective the date of this letter, is subject to the conditions set forth in the original appointment letter. You will serve under this appointment for an additional period not to exceed October 15, 2018, unless extended. You will continue to serve without compensation other than that which you are now receiving under your existing appointment. No additional appointment papers are necessary.

Yours sincerely,



WENDY J. OLSON  
United States Attorney

Enclosures  
cc: Elizabeth A. Smith, Clerk of the Court



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October 16, 2014

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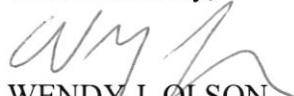
RE: SAUSA Appointment

Dear Ms. Mroczek:

Pursuant to 28 U.S.C. § 543, effective the date of this letter you are hereby appointed as a Special Assistant United States Attorney for the District of Idaho, subject to the following conditions:

1. You are appointed to assist the Office with Social Security cases.
2. The appointment expires on October 15, 2016, unless extended.
3. You will report to and act under the direction of Criminal Chief or Civil Chief at the U.S. Attorney's Office/District of Idaho with regard to any matters handled.
4. You understand and agree to serve without compensation other than that which you are now receiving under your existing appointment.
5. This appointment may be terminated at any time without cause or notice.
6. You must execute and return to the Personnel Staff within 14 days the enclosed Appointment Affidavit containing the oath of office, Statement of Appointment Conditions, and a signed copy of this letter. Your signature in the space provided below acknowledges your agreement to the terms and conditions of this appointment.

Yours sincerely,



WENDY J. OLSON  
United States Attorney

Enclosures

cc: Elizabeth A. Smith, Clerk of the Court

The foregoing terms and conditions are hereby agreed to and accepted:

Danielle R. Mroczek  
Danielle Renee Mroczek

10/28/2014  
Date:

