DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency **MISSION ASSIGNMENT (MA)**

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this form is estimated to average 20 minutes per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the needed data, and completing and submitting this form. This collection of information is required to obtain or retain benefits. You are not required to respond to this collection of information unless it displays a valid OMB control number. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing this burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW, Washington, DC 20472-3100, Paperwork Reduction Project (1660-0047). NOTE: Do not send your completed form to this address .										
I. TRACKING INFORMATION (FEMA Use Only)										
							Request Number			
Program Code/Event Number 4529DR-NM: COVID-19 PANDEMIC					Date/Time Received 04/06/2020 18:16					
II. ASSISTANCE REQUIRED				X See	e Attache	ed				
Assistance Requested ***This is a reissue of 3460EM-NM-USFS-01 under the DR which and extend POP by 30 days as requested by the state.	h was issued 5 APR 202	0*** And als	o serves to add a	dditional fur	nding of \$1	30,000.00				
The state of NM requests the following resources to support the COVID-19 response. Request the USFS (ESF #4) to provide command, control, and										
Delivery Location Dept. of Homeland Security , 13 Bataan Blvd Santa Fe , NM 87508			Internal Control Number			Date/Time Required 04/06/2020				
Initiator/Requestor Name		Hour Phone Number Email Address					Date			
Federico Hernandez	(505) 470-4712	0-4712 federico.hernandez@s			tate.nm.us		04/06/2020			
Site POC Name	24 Hour Phone N		Email Addres	SS			Date			
Federico Hernandez		(505) 470-4712			04/06/2020		04/06/2020			
III. INITIAL FEDERAL COORDINATION (Operations Section)										
Action to: X ESF # : 4 □ Other : □ RSF:						Lifesavin Life susta	esaving 🕅 3. High e sustaining 🗌 4. Normal			
IV. DESCRIPTION (Assigned Agency Action Officer)										
Statement of Work In support of a request from the State of New Mexico, and in coordination with FEMA, US Forest Service (USFS) will provide command, control, and coordination resources, to include command and general staff members or personnel with other specialized qualifications, to support response operations to COVID-19.										
Your agency must validate the unliquidated MA balance at least annually as stipulated by FEMA to maintain reimbursable authority. Accrual data must also be provided to FEMA no later than the third business day after fiscal quarter end close. Information can be submitted to FEMA-Disaster-MA-ULO@dhs.gov. For MA billing and reimbursement information, please visit http://www.fema.gov/federal-agencies-providing-disaster-assistance.										
Assigned Agency USFS (U.S. FOREST SERVICE)		Projected Start Date 04/05/2020			Estimated Projected End Date 05/05/2020					
IX New or Amendment to MA # :	Т	otal Cost Estimated \$197,200.00		,200.00	Total	tal Required this Obligation Cycle				
ESF/OFA/RSF Action Officer BILLY ZAMORA			Phone # (505) 362-7001		Email billy_zamora@firenet.gov					
V. COORDINATION (FEMA Use Only)										
Type of MA:Direct Federal AssistanceFederal Operations SupportIXState Cost Share (0%, 10%, 25%)IState Share (0%)										
State Cost Share Percent 25 % State Cost Share Amount: \$ 49,300.00										
Fund Citation: 20 <u>2</u> <u>0</u> -06- <u>4</u> 5 <u>2</u> 9 <u>D</u> R-90	6 <u>4</u> XXXX-250 <u>8</u>	₈ -D A	ppropriation co	ode: 70X	0702					
Mission Assignment Manager (Preparer) JUDITH CHRISTIANS 🌮							Date 04/06/2020			
**FEMA Project Manager/Branch Director (Program Approval) CHRISTINE HANSON S						Date 04/06/2020				
**Comptroller/Funds Control (Funds Review) JAMES MARTIN S>						Date 04/07/2020				
FEMA FORM 010-0-8 PREVIOUSLY FF 90-129 Previously FF 90-129						Page 1 of 2				

Region 6, State NM, 4529DR, MA#1509-315324 (IFMIS Closed) as of 04/07/2020

MISSION ASSIGNMENT (MA)

VI. APPROVAL									
*State Approving Official (Required for DFA)	Date								
**Federal Approving Official (Required for all)	Date 04/07/2020								
VII. OBLIGATION (FEMA Use Only)									
Mission Assignment Number <u>4529DR-NM-USFS-01</u>	Amount This Action \$_	197,200.00	Date/Time Obligated	: 04/07/2020					
Amendment Number00	•	ative Amount \$ _197,200.00 Initials: IFMIS							
** Signature required for all MAs.									
INSTRUCTIONS Items on the Mission Assignment (MA) form that are not listed are self-explanatory.									
I. TRACKING INFORMATION. Completed by Resource Support Section or Operations staff. Required for all requests.									
<u>State:</u> If multi-State, choose State most likely to receive resource(s), (i.e., when using 7220-SU Program Code) <u>Resource Request No.</u> : Based on chronological log number. Used for tracking. <u>Program Code/Event No.</u> : The pre-declaration, emergency, or major disaster number assigned for funding the event. Examples: 7220-SU, 3130-EM, 1248-DR.									
II. ASSISTANCE REQUESTED. Completed by requestor.									
Assistance Requested: Details from the Resource Request Form will provide information concerning the assistance requested. Internal Control No.: Internal requestor reference, log, or control number, if applicable. Initiator/Requestor: The initiator may be an individual filling out the mission assignment and making a request on behalf of the POC. POC Name: The person coordinating reception and utilization of the requested resources. 24-hour contact information required. III. INITIAL FEDERAL COORDINATION. Completed by FEMA Personnel with Delegated Authority.									
Action to: May be Emergency Support Function (ESF), Recovery Support Function (RSF), internal FEMA organization, or other organization, which assigns the Action Officer.									
Remainder of MA used only if solution is to request Federal agency to perform reimbursable work under (MA). Deliberate validation and verification of information must occur before MA is completed and issued.									
IV. DESCRIPTION. Completed by assigned agency Action Officer.									
<u>Statement of Work:</u> Detailed description of work to be performed that includes: Overview of MA, objectives, tasks, resources, personnel, deliverable, location, period of performance and comprehensive cost estimate for period of performance. Statement of Work may be attached. Additional guidance concerning the writing of a Statement of Work can be found in the Mission Assignment Guide and FAR. <u>Assigned Agency:</u> Agency receiving the MA from FEMA. Activities within the scope of an ESF/RSF result in an MA to primary agency. Cite subordinate organization if applicable. Example; DOT-FAA, COE-SAD. <u>Projected Start/End Date</u> : If end date is not clear, estimate and budget for 30, 60, or 90 days, then reevaluate. TBD is not acceptable; a date must be entered.									
Total Cost Estimate: Enter dollar value and attach a detailed budget outlining personnel, equipment, contract, sub-tasked agency, travel and other costs. The cost estimate should include the total cost projection for the MA across the entire length of the MA. The 90 day obligation cycle is used to obligate funding in 90 day increments when completion period is expected to exceed 90 days.									
 COORDINATION. Completed by MAM, except for Project Manager and Comptroller signatures. Type of MA: Select only one. <u>Appropriation Code</u>: Static data. Do not change. This is for information only, should not be used to report internal agency finances to Treasury. 									
Reporting: MA agencies are required to provide reporting as determined by the Program Manager.									
VI. APPROVAL. Completed by State Approving Official and Federal Approving Official.									

VII. OBLIGATION. Completed by Financial Specialist

<u>Mission Assignment No</u>.: Assigned in FEMA financial system chronologically using assigned agency acronym and two digit number. <u>Amendment No</u>.: Note supplement number. For example: COE: SAD-01, Supp. 1, or DOR-08, Supp. 3. <u>Amount this Action</u>: Taken from total cost estimate above.

Cumulative Amount: Cumulative amount for this MA, including amendments.

Assistance Requested Continued from Block II

coordination resources and other personnel with other specialized qualifications to include but not limited to: at least 8 personnel to provide technical assistance and augment NM EOC operations. 1 PIO1 (name request Karen Takai, virtual), 1 SOPL (strategic operational planner), 1 PSC2, 2 IT specialists, 2 SCKN Status Check IN Recorder, 1 FSC2. These resources would be local only and would come from our federal wildland fire partners in the Southwest Geographic Area

Additional Statement of Work

USFS will utilize other Federal agency and State/local resources under existing agreement, as appropriate.

If authorized by FEMA, USFS will establish a Base Camp to provide lodging, meals, and support for command/control personnel and equipment. This will be provided in lieu of per diem and under a separate mission assignment.

Additional Special Instructions by FEMA:

- MA task orders (MATOs) may be issued by FEMA for specific requirements, personnel, location(s), date(s), and duration of assignment(s).

- Agencies will be reimbursed for all eligible expenses pursuant to 44 CFR. Supporting documentation is required for reimbursement.

- All equipment and supply purchases must be coordinated with FEMA Project Manager. If approved, documentation is necessary to ensure reimbursement.

- Activation of agency command center(s), if required, must be coordinated with FEMA as a separate MA.

- The mission-assigned agency is responsible for ensuring that all activity is properly authorized, goods are received, services are provided, and that costs are reasonable and supported by documentation maintained by the respective agency

- MAs shall be considered for closure after 180 days with no financial activity in accordance with FEMA CFO Bulletin #157. For MAs still operationally open, requests for additional obligations may be withheld if no invoicing, ULO Validation, or additional justification has been provided.