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 Or	nly)								
					Resource Request Number 2591-469776				
Program Code/Event Number 4481DR-WA: COVID-19 PANDEMIC					Date/Time Received 01/15/2021 17:06				
II. ASSISTANCE REQUIRED See Attached									
Assistance Requested Activate USFS to remotely support the Region 10 RRCC in response	onse to COVID opera	tions.							
Delivery Location Region 10 RRCC, 130 228th Street SW Bothell, WA 98021			Internal Control Number			Date/Time Required 01/19/2021			
Initiator/Requestor Name 24 Hour Phone I		Number	Number Email Address		Date		Date		
Don Price (425) 381-0475		75	donald.price@fema.dhs		.gov 01/15/2021		01/15/2021		
Site POC Name	ite POC Name 24 Hour Phone Nu		umber Email Address		Date		Date		
Don Price	Don Price (425) 381-0475						01/15/2021		
III. INITIAL FEDERAL COORDINATION (Operation	s Section)								
ction to:			Date/Time			1. Lifesaving 3. High 2. Life sustaining 4. Normal			
IV. DESCRIPTION (Assigned Agency Action Officer)						X See Attached			
As directed by and in coordination with FEMA, US Forest Service facilities in support of disaster operations. Your agency must validate the unliquidated MA balance at least annulater than the third business day after fiscal quarter end close. Informing visit http://www.fema.gov/federal-agencies-providing-disaster-assista	ually as stipulated by nation can be submitte	FEMA to main	tain reimbursable	authority. Ac	crual da	ta must also be			
Assigned Agency USFS (U.S. FOREST SERVICE)			Projected Start Date 01/19/2021			Estimated Projected End Date 04/19/2021			
New or Amendment to MA # :		Total Cost	Cost Estimated Total Require		l Required t	this Obligation Cycle			
ESF/OFA/RSF Action Officer BOBETTE ROWE			Phone # (907) 205-1150		Email bobette.rowe@usda.gov				
V. COORDINATION (FEMA Use Only)									
Type of MA: Direct Federal Assistan □ State Cost Share (0%,			Federal Opera State Share (port				
State Cost Share Percent 0 %		State	Cost Share	Amount: \$	0.00				
Fund Citation: 20 <u>2</u> <u>1</u> -06- <u>4</u> 4 <u>8</u> 1 <u>D</u> R- 9 <u>1</u> (0 <u>4</u> XXXX-250	<u>1</u> -D A	ppropriation o	ode: 70X0	702		,		
Mission Assignment Manager (Preparer) JOE ARANA '9"							Date 01/15/2021		
**FEMA Project Manager/Branch Director (Program Approval) **DONALD PRICE **						Date 01/15/2021			
**Comptroller/Funds Control (Funds Review) THOMAS ROBERTS **							Date 01/20/2021		

Region 10, State WA, 4481DR, MA#1509-339995 (IFMIS Closed) as of 01/20/2021

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VI. APPROVAL							
*State Approving Official (Required for DFA)	Date						
**Federal Approving Official (Required for all) **TIMOTHY MANNER **	Date 01/15/2021						
VII. OBLIGATION (FEMA Use Only)	'						
Mission Assignment Number 4481DR-WA-USFS-04 Amount This Action \$ 5,000.00 Date/Time C	Obligated : 01/20/2021						
Amendment Number 00 Cumulative Amount \$ 5,000.00 Initials: I	FMIS						
** Signature required for all MAs.							

INSTRUCTIONS

Items on the Mission Assignment (MA) form that are not listed are self-explanatory.

TRACKING INFORMATION. Completed by Resource Support Section or Operations staff. Required for all requests.

State: If multi-State, choose State most likely to receive resource(s), (i.e., when using 7220-SU Program Code)

Resource Request No.: 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.

<u>Assistance Requested:</u> 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.

<u>Initiator/Requestor</u>: 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.

<u>Total Cost Estimate</u>: 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.

V. 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

Mission Assignment No.: Assigned in FEMA financial system chronologically using assigned agency acronym and two digit number.

Amendment No.: Note supplement number. For example: COE: SAD-01, Supp. 1, or DOR-08, Supp. 3.

Amount this Action: Taken from total cost estimate above.

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

Additional Statement of Work

ADDITIONAL NOTES from 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. 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.

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