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

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this form is estimated to ave searching existing data sources, gathering and maintaining obtain or retain benefits. You are not required to respond regarding the accuracy of the burden estimate and any sug Security, Federal Emergency Management Agency, 500 C not send your completed form to this address.	the needed data, and to this collection of gestions for reducin	d completin of informating this burd	ng and submittin on unless it dis en to: Informatio	ng this form splays a v on Collecti	n. This co alid OME ons Man	ollection of 3 control n agement, I	information is required to umber. Send comments Department of Homeland	
I. TRACKING INFORMATION (FEMA Use O	nly)							
					Resource Request Number 2651-480598			
Program Code/Event Number 4485DR-TX: COVID-19 PANDEMIC					Date/Time Received 03/04/2021 01:06			
II. ASSISTANCE REQUIRED				☐ See	Attach	ed		
Assistance Requested Amend #1: Amend to extend end date to 4/2/2021 per State of To required at this time.	exas request and concu	urrence by U	SFS to continue s	upport. No a	additional	funding		
Request medical personnel to support mass vaccination site at the Texas Motor Speedway conducted by Denton County, TX.								
Delivery Location TExas Motor Speedway , 3545 Lone Star Circle Fort Worth , TX 76177		Internal Control Number			C	Date/Time Required 03/03/2021		
Initiator/Requestor Name	24 Hour Phone N	Number Email Address					Date	
Gisela Ryan-Bunger	(512) 203-0156		gisela.ryan-bunger@tdem.texas.gov			gov	03/04/2021	
Site POC Name	24 Hour Phone N		umber Email Address				Date	
Eric Hutmacher	(940) 735-0292					03/04/2021		
III. INITIAL FEDERAL COORDINATION (Operation	-			1				
Action to: IX ESF # : 4 I Other : Date/Time Priority X 1. Lifesay IC RSF: I 03/03/2021 23:39 I 2. Life su 2. Life su								
		03/0	5/2021 25.59			Life susta	0	
IV. DESCRIPTION (Assigned Agency Action	Officer)				X	See Atta	ached	
Statement of Work In support of the State of Texas request and as directed by and i EMTs (but not limited to EMTs) to support the COVID Vaccinatio appropriate Medical Personnel to administer vaccinations only.	n Campaign efforts. US	FS will supp	ort the COVID Vac	ccine Campa	aign with			
Your agency must validate the unliquidated MA balance at least ann later than the third business day after fiscal quarter end close. Inform visit http://www.fema.gov/federal-agencies-providing-disaster-assista	nation can be submitted	EMA to main I to FEMA-Di	tain reimbursable saster-MA-ULO@	authority. Ad dhs.gov. Fo	ccrual data r MA billin	a must also b g and reimbu	be provided to FEMA no ursement information, please	
Assigned Agency USFS (U.S. FOREST SERVICE)			Projected Start Date 02/02/2021			Estimated Projected End Date 04/02/2021		
New or X Amendment to MA # : 4485DRTX		Total Cost	otal Cost Estimated \$0.00		Total Required this Obligation Cycle			
ESF/OFA/RSF Action Officer			Phone #		Email			
LEX GABALDO			(775) 443-7145		alexis.gabaldo@usda.gov			
V. COORDINATION (FEMA Use Only)								
Type of MA:Direct Federal AssistanceFederal Operations SupportXState Cost Share (0%, 10%, 25%)IState Share (0%)								
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> 5 <u>D</u> R-90	6 <u>4</u> XXXX-250	<u>8</u> -D A	ppropriation co	ode: 70X0)702			
Mission Assignment Manager (Preparer) JUDITH CHRISTIANS SA						Date 03/04/2021		
**FEMA Project Manager/Branch Director (Program Approval) SHANNON MORAN S						Date 03/04/2021		
**Comptroller/Funds Control (Funds Review) BARBARA BOUVIA S						Date 03/04/2021		
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Region 6, State TX, 4485DR, MA#1509-344484 (IFMIS Closed), Amendment to MA#1509-341282 as of 03/04/2021

MISSION ASSIGNMENT (MA)

VI. APPROVAL								
*State Approving Official (Required for DFA)	Date							
**Federal Approving Official (Required for all) DENISE BORDELON Solution	Date 03/04/2021							
VII. OBLIGATION (FEMA Use Only)								
Mission Assignment Number 4485DR-TX-USFS-01 Amount This Action \$ Date/Time Obligated	: 03/04/2021							
Amendment Number 01 Cumulative Amount \$ _299,227.20 Initials: IFMIS	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. <u>Initiator/Requestor</u> : The initiator may be an individual filling out the mission assignment and making a request on behalf of the POC. <u>POC Name:</u> 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>Fotal 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.								
 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. <u>Reporting:</u> 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.

FEMA FORM 010-0-8

Additional Statement of Work

- The resources working on site will follow all CDC, National Wildfire Coordinating Group (NWCG), and Fire Management Board (FMB) guidance

for the prevention and mitigation of COVID-19. - A safety in-briefing and appropriate training will be provided by ranking clinical personnel upon the resources arrival for duty.

PPE will be provided by the state.
 If N95 masks are expected to be worn, fit testing must be provided by the vaccination site.

- Resources administering vaccinations will not be assigned other tasks unless cleared through the Regional ESF4 Liaison.

- FEMA will approve the activation and costs of support personnel which will be negotiated and based upon the scale of the deployment. Personnel may include timekeepers, safety officers, agency reps, or mobilization personnel, etc.

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.