| | | DEPARTMENT OF HOME | AND | SECURITY | | 1 | | | | | | |
|--|--|--|-----------------------------|---|----------------|--|---|--------------------------------|--|--|-------------------|--|
| DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY MISSION ASSIGNMENT (MA) | | | | | | | See Reverse for Paperwork Burden Disclosure Notice | | | O.M.B. NO. 1660-0047 Expires March 31, 2014 | | |
| | CKI | NG INFORMATION (FEMA Use Only | y) | | | | | | | | | |
| State FL (Florida) Incident 2017083101-Hurricane IRMA | | | | | | | | | EMIS Number 1509-238379 | | | |
| Program Code/Event Number 3385EM-FL: HURRICANE IRMA | | | | | | | | Date | Date/Time Received 09/07/2017 12:32 | | | |
| II. ASSISTANCE REQUIRED See Attached | | | | | | | | | | | | |
| Assistance Re | ques | sted | | | • . | | | 0007111 | | | | |
| | eploy | Increase funding by (\$7,269,245,00) to a Region 4 federal IRMA Response in the armed Federal Law Enforcement Office Various, as directed. | ic charc | or Frontia providing | rorce protect | ion to di | epidyed federa | resources. | ired, and | | | |
| FL 00000 | | | | 1870-306681 | | | | | | Date/Time Required 09/07/2017 | | |
| Initiator/Requestor Name Terry Brown | | | | 24 Hour Phone (770) 853-7157 | | Email Address terry.brown5@fema.dhs.gov | | | Date 09/0 | | | |
| Sito POC Name SOUTHERLAND, JOHN ALEXANDER | | | | | | | Email Address | | | Date | | |
| | | Official (Required for DFA and TA) | | (404) 909-1943 john.southerland@fema.dt | | | | ma.dhs.gov | | | | |
| _ | | | | | | | | | | | Date | |
| III. (NITI/ | | EDERAL COORDINATION (Operati | ons Se | ction) | | | | | | | | |
| Action to: | | ESF#:Other: | Date | e/Time | - - | Pr | iority | 1. Lilesav | - 4 | X 3 | i. High | |
| IV. DESCRIPTION (Assigned Agency Action Officer) | | | | 09/07/2017 12:20 | | | | 2. Life sus | | | . Medium | |
| Statement of W | | (Final Street Figure) Action Of | 110011 | | | | | | ☐ See | Attache | d | |
| Your agency must validate the untiquidated MA balance at least annually as stipulated by FEMA to maintain reimbursal provided to FEMA no later than the third business day after fiscal quarter end close. Information can be submitted FEM. Assigned Agency USDJ (U.S. DEPARTMENT OF JUSTICE) | | | | | | | | ate | e Projected End Date | | | |
| ☐ New or ☐ Amendment to MA #: 3385EMFLUSDJ0100 | | | | | | Tot | 09/06/2017 09/20/2017 Total Cost Estimate | | | | | |
| SF/OFA Action | | .00000000 | \$7,269,245.00 Phone No. | | | | Email | | | | | |
| | | DAVID FIELDS | | | | | | | | vid.fields@atf.gov | | |
| | ìDIN | ATION (FEMA Use Only) | | | | | · · | | | Gamage | · | |
| | Type of MA: Direct Federal Assistance State Cost Share (0%, 10%, 25%) Technical Assistance State Share (0%) Technical Assistance State Share (0%) | | | | | | | | Federal (State Sh | deral Operations Support te Share (0%) | | |
| tate Cost Share Percent 0.0 % State Cost Share Amount: \$ 0.00 | | | | | | | | | | | | |
| und Citation: | | 2017-06-3385EM-9044-XXXX-2501-D | | | Appropri | ation co | de: 70X0702 | | | | | |
| Assignment Manager (Preparer) | | | | | | | | | | | ate | |
| CHRISTOPHER MANOWSKI FEMA Project Manager/Branch Director (Program Approval) | | | | | | | | | | 09/07/2017 | | |
| JOHN SOUTHERLAND Comptroller/Funds Control (Funds Review) | | | | | | | | | | | ate 09/07/2017 | |
| HARMON, MERLE P. APPROVAL | | | | | | | | | | ٥ | ate 09/07/2017 | |
| | _ | cial (required for DFA and TA): | - | · · · | · | | | | | D | ale | |
| ederal Approving Official (required for all): | | | | | | | | | Da | ate | | |
| . OBLI | GAT | ON (FEMA Use Only) | TERR | RY BROWN | | | | | | | 09/07/2017 | |
| ission Assignment Number 3385EM-FL-USDJ-01 Amount This Action \$ 7,269,245.00 | | | | | | | | Date/Time Obligated 09/07/2017 | | | | |
| nendment Number 01 Cum | | | | ulative Amount \$ 8,269,245.00 | | | Initials: IFMIS | | | | | |
| Signature red | ulre | d for Direct Federal Assistance a | and Te | chnical Assista | 100 MA- | | | 1 | ··· | | | |
| Signature rec | uire | ed for all MAs. | | omica Maaia(d) | ICO MAS. | | | | | | | |