

AGENCY PAYMENT TOOL KIT					
AGENCY	ADs	CONTRACT PAYMENTS	TRAVEL	AGENCY-OWNED EQUIPMENT	WORKERS COMPENSATION
BUREAU OF INDIAN AFFAIRS	OF-288 sent back with the AD for the home unit to process.	Processed by the incident agency and/or a payment team.	Home unit processes.	NA	Original paperwork goes home with the Crew Boss or mailed to the home unit. <u>POC</u> : Employee's home unit FMO.
BUREAU OF LAND MANAGEMENT	OF-288 sent back with the AD for the home unit to process.	Processed by the incident agency and/or a payment team.	Home unit processes.	NA	Original paperwork goes home with the employee. <u>POC</u> : Employee's home unit compensation coordinator.
NATIONAL PARK SERVICE	OF-288 sent back with the AD for the home unit to process.	Processed by the incident agency and/or a payment team.	Home unit processes.	NA	Mail original paperwork to the home unit. <u>POC</u> : Employee's home unit compensation coordinator.
U.S. FISH & WILDLIFE SERVICE	OF-288 sent back with the AD for the home unit to process.	Processed by the incident agency and/or a payment team.	Home unit processes.	NA	Mail original paperwork to the home unit. <u>POC</u> : Employee's home unit compensation coordinator.
U.S. FOREST SERVICE Albuquerque Service Center Incident Finance Branch-Casual Pay 101B Sun Avenue NE Albuquerque, NM 87109	OF-288 uploaded to ASC via I-Suite. Original OF-288 with signatures sent overnight to ASC.	Original invoice and agreement are sent overnight to ASC from the incident.	ADs processed on OF-288 via I-suite; agency employees processed by home unit.	NA	Illness/injury documented in SHIPS. Populated CA-1 or CA-2 printed, signed and faxed to ASC-HCM, WC at 866-339-8583. Original retained by the employee.

STATE	STATE EMPLOYEES	CONTRACT PAYMENTS	TRAVEL	AGENCY-OWNED EQUIPMENT	WORKERS COMPENSATION
<p>IDAHO</p> <p>Bureau of Fire Management 3284 West Industrial Loop Coeur d'Alene, ID 83815</p> <p>Questions contact: Wendy J. Walter Work: (208) 666-8648 or Debbie Godfrey Work: (208) 666-8639</p>	<p>Original Firefighter Time Reports (OF-288) are given to State employees (including State Casual employees) and cooperator resources at demobilization for processing at home unit.</p>	<p>Original invoices will be audited at the local unit and paid by Bureau of Fire Management in Coeur d'Alene.</p>	<p>Home unit processes.</p>	<p>Cost of state equipment used is billed per IDL Vehicle and Equipment Rental Rates. OF-297 Emergency Equip. Shift Tickets are utilized for home unit use and should not be provided to Finance.</p>	<p>Document injury/illness on CA1, CA2, CA16. Claim submitted by home unit. IDL jurisdiction fire - follow process in Chapter 50 Geographic Supplement. For questions, call the state duty officer at 208-769-1530.</p>
STATE	STATE EMPLOYEES	CONTRACT PAYMENTS	TRAVEL	AGENCY-OWNED EQUIPMENT	WORKERS COMPENSATION

<p>NEVADA</p> <p>Nevada Division of Forestry 2478 Fairview Drive Carson City, NV 89701 (775)684-2500</p> <p>Questions contact: Mary Wilde (775) 684-2516</p>	<p>Original Crew Time Reports (SF-261) and Firefighter Time Reports (OF-288) are given to all Nevada State resources at demobilization.</p> <p>Only helitack (excluding the pilot) are entitled to hazard pay.</p> <p>Original Firefighter Time Reports (OF-288) are given to NV Cooperators (city, county, rural) at demobilization for processing at home unit.</p>	<p>All I-BPA and EERA invoices will be processed for payment through NDF for Nevada State jurisdiction fires.</p>	<p>Home unit processes.</p>	<p>Original Crew Time Reports (SF-261) and Firefighter Time Reports (OF-288) are given to all Nevada state personnel assigned to equipment at demobilization.</p> <p>Do not complete Equipment Use Invoice, OF-286, for NV cooperator equipment (city, county, rural). Cooperators will be given original Firefighter Time Report, OF-288.</p>	<p>Document injury on C1, C3, and Investigation Report. Claim will be submitted by home unit. For questions, call the Personnel Technician II at (775) 684-2504.</p>
STATE	STATE EMPLOYEES	CONTRACT PAYMENTS	TRAVEL	AGENCY-OWNED EQUIPMENT	WORKERS COMPENSATION

<p>UTAH Administrative Payment Address:</p> <p>Forestry Fire and State Lands 1594 W. North Temple, Suite 3520 Salt Lake City, UT 84114</p> <p>Questions contact: Jane Martinez Cell: (801) 541-6764</p>	<p>Original Crew Time Reports (SF-261) and Firefighter Time Reports (OF-288) are given to the employee. State employees are entitled to hazard pay.</p> <p>Equipment time for cooperators will be recorded using the Equipment Shift Ticket OF-297. Personnel are typically included in the rate (wet). The shift ticket must list personnel by name each day to account for shift changes and authorized number of personnel.</p> <p>An equipment use invoice, OF-286, is recommended for incident documentation but is not required for State payment. Original documents are given to the cooperator at time of demobilization. Copies are retained by the incident.</p>	<p>All I-BPA and EERA invoices will be processed for payment through Forestry, Fire and State Lands for all State jurisdictional fires (State, private, and county lands).</p>	<p>Home unit processes.</p>	<p>Engine hourly use is recorded on block 11 of form SF-261.</p> <p>Vehicle usage for overhead and crew transport is documented through fleet reporting at the home unit.</p> <p>Reimbursable rates are listed in the Fire Wardens Field Manual.</p>	<p>State employee and/or state supervisor will document injury/illness on Dept. Natural Resource form HR-6 available at http://www.lonepeak.utah.gov/business_mgmt.html. The form will be submitted by employee or supervisor to DNR-Karen Harris (o) 801-538-7212, (fax) 801-538-7219, email: karenharris@utah.gov.</p> <p>State cooperators are required to carry workers compensation insurance on all employees and volunteers. Cooperator employees will provide contact information and reporting procedures for their worker's compensation provider.</p>
---	---	--	-----------------------------	--	--