# Texas Division of Emergency Management STATE OF TEXAS MUTUAL AID PARTNER REIMBURSEMENT SUBMITTAL DOCUMENTATION CHECKLIST

# 1) In State Mutual Aid Reimbursement Invoice

Complete the In State Mutual Aid Reimbursement Invoice form which summarizes amounts claimed for Employee Labor and Backfill, Travel, Equipment, Material, Rented Equipment and Contract costs. A complete reimbursement packet shall include:

List amounts claimed for:

Force Account Labor - deployed and backfill

Travel

Force Account Equipment

Materials

Rented Equipment

Contracts

Include a brief narrative of services and tasks performed in the Invoice form's Description of Services Provided

## 2) SDRS Disaster Reimbursement Applicant Contact List

Lists the Primary Point of Contact, Alternate, and/or three other contacts.

# 3) Force Account Labor Summary Record (Deployed Labor, and Backfill Labor and Benefits Calc Tabs):

- a. Deployed Force Account Labor Summary Record (Deployed Labor Tab)
  The Force Account Labor Summary Record is an accounting of each individual's daily hours spent on disaster work. The following information is required:
  - o Employee name, job title, hours worked (regular and overtime), and fringe benefit amount.
  - o Accounting of each individual's daily hours spent on disaster work.
  - Crew Time Reports, Activity Logs and/or Unit Logs for deployment
  - Payroll policy in effect at time of disaster, include overtime policy and differential between exempt and nonexempt personnel. Also includes pay rates for regular and O/T personnel by individual employee.
    - Payroll database reports for deployment pay period that includes proof of payment, all hours worked for
  - o periods involved, pay rates for regular and overtime hours, benefits paid by individual employee. (As a Proof of Payment, a pay stub with itemized breakdown will also work).
  - Time sheets showing all hours worked during the pay periods involved.
  - o If applicable, a copy of Minimum Staffing Requirements policy in place prior to the activation.
  - Mobilization and Demobilization orders (STAR) should be included when applicable.

#### b. Backfill Force Account Labor Summary Record (Backfill Labor Tab)

- o Employee name, job title, hours worked (regular and overtime), and fringe benefit amount.
- Accounting of each individual's daily hours spent on backfill duty.
- Designate which deployed personnel the individual is backfilling for.
- Payroll policy in effect at time of disaster, include overtime policy and differential between exempt and non-exempt personnel. Also includes pay rates for regular and O/T personnel by individual employee.
  - Payroll database reports for deployment pay period that includes proof of payment, all hours worked for
- o periods involved, pay rates for regular and overtime hours, benefits paid by individual employee. (As a Proof of Payment, a pay stub with itemized breakdown will also work).
- Time sheets showing all hours worked during the pay periods involved.

- If applicable, either a copy of the Backfill Policy or the Minimum Staffing Requirements policy in place prior to the activation.
- c. Fringe Benefit Calculations Worksheet (Benefits Calc Tab)
  - Applicant's Benefit Calculation Worksheet the employee's fringe benefit information can be calculated by individual employee or an average rate can be calculated for the department.
  - The rates calculated must be carried to the Force Account Labor and Backfill tabs.
- d. Shift Information (Shift Information Tab)
  - What are regular shift hours? Number of regular hours in a pay period. What are the number of hours before
  - o overtime goes into effect? Are there any "built in" overtime hours in a pay period? What is the total number of work hours in a fiscal year? How many pay periods in a fiscal year?
  - Shift calendar applicable to the pay periods involved.

# 4) Travel Summary Record (Travel Tab)

Invoice/Receipt must show:

Vendor and location

**Transaction Date** 

Amount

Provide detailed itemized with per unit cost

Food and beverage itemized receipts are not required by TDEM unless applicant is submitting for actual cost reimbursement or required by applicant's agency. Credit card receipts with only a total are not acceptable documentation.

- Following the Texas Comptroller's TexTravel website, please refer to the GSA website for per diem, meals and incidental expense information. https://www.gsa.gov/portal/content
- Lodging receipt must show a "zero" balance
- Send copies of itemized lodging receipts, in employee and date order
- o "Other" costs may include airfare, tolls, parking, laundry, etc.
- Copy of travel policy in effect at time of incident, unless following State Travel Guidelines (GSA guidelines).
- Proof of payment for all expenses, including Purchase Card statement. If purchases were made on an employee credit card, proof that employee was reimbursed must be included.
- o Mileage claimed must be for a personal vehicle use only and documented using Google Maps or MapQuest
- Please review the receipts for reimbursement eligibility. Examples of ineligible costs include tobacco products,
- personal hygiene items, and alcoholic beverages. GSA guidelines allow tip reimbursement.
- Receipts and invoices that have been written over will not be accepted.
- a. Group Meals Summary Record (Group Meal >8 Tab)
  - Form to be completed for each meal when one person pays for more than eight deployed personnel. List of personnel and jurisdiction is to be included.
  - Proof of payment for all expenses, including Purchase Card statement. If purchases were made on an employee credit card, proof that employee was reimbursed must be included.
- 5) Force Account Equipment Summary Record (equipment owned by applicant Equipment Tab)
  - Vehicle/Equipment used to provide services for the incident and listed as a resource on the Resource Orders

Description including type, make, model, hp, unit number, TIFMAS "E" number, etc.

FEMA Equipment Cost Code

Daily hours used (provide maps, fleet logs, etc. to support hours claimed)

Operator for each piece of equipment, accounting for each hour equipment was used.

Provide a description of the task equipment performed (attach a separate sheet if necessary.)

The Incident Hours Tab can be used if applicant has no other form.

Vehicles used to transport incident personnel

Description including type, make, model, hp, unit number, etc.

FEMA Equipment Cost Code

Driver assigned to vehicle

Origin and destination of each trip

Mileage driven per trip (provide maps, fleet logs, etc. to support mileage claimed.)

Provide a purpose of each trip (attach a separate sheet if necessary.)

The Incident Mileage Tab can be used if applicant has no other form.

Proof of ownership of equipment (i.e. Title, Asset or inventory list)

## 6) Materials Summary Record (Material Tab)

Invoice/Receipt must include:

Vendor and location

Purchase date

Provide detailed itemization with per unit cost

- o Provide explanation of use of item purchased
- Attach copies of itemized receipts for all claimed expenses
- Review the receipts for reimbursement eligibility. Examples of ineligible costs include tobacco products, personal hygiene items, and alcoholic beverages.
- o If materials were purchased and not used could they have been returned for credit?
- Proof of payment (i.e. check, petty cash voucher, Purchase Card statement and proof of payment). If purchased on employee credit card, proof that employee was reimbursed.
- o If materials were taken from inventory:

Need inventory report, invoice showing items purchased, cost and proof of payment, or Replacement documentation, invoice showing items purchased, the cost and proof of payment

- Signature of receipt of goods purchase
- Receipts and invoices that have been written over will not be accepted.
- Proof of payment for all expenses, including Purchase Card statement. If purchases were made on an employee credit card, proof that employee was reimbursed must be included.

## 7) Rented Equipment Summary Record (Rental Tab)

o Invoice/Receipt should show:

Vendor

**Transaction Dates** 

Provide detailed itemization with per unit cost

If applicable, include:

copy of the Contract

Memorandum of Understanding

**Purchase Orders** 

other documents that outline conditions, terms and rates for services

- o A description of what the equipment was used for (attach a separate sheet if necessary.)
- Signature of receipt of goods and when equipment is returned/released
- Proof of payment for all expenses, including Purchase Card statement. If purchases were made on an employee credit card, proof that employee was reimbursed must be included.

#### Contract Work Summary Record (Contract Tab)

- o Invoice/Receipt should show:
  - Vendor
  - **Transaction Dates**
  - Detailed itemization with per unit cost
  - A description of what services were provided by contracted parties.
- o Include:
  - copy of the Contract
  - Memorandum of Understanding
  - **Purchase Orders**
  - other documents that outline conditions, terms and rates for services
- o Include proof of competitive bid when applicable.
- All pre-existing procurement rules must be adhered to.
- o Terms and rates must be reasonable.
- o Signature of receipt of goods/services
- Proof of payment for all expenses, including Purchase Card statement. If purchases were made on an employee credit card, proof that employee was reimbursed must be included.