

DEPARTMENT OF HOMELAND SECURITY  
 FEDERAL EMERGENCY MANAGEMENT AGENCY  
**FORCE ACCOUNT LABOR SUMMARY RECORD**

PAGE \_\_\_\_\_ OF \_\_\_\_\_

*O.M.B. No. 1660-0017  
 Expires December 31, 2011*

APPLICANT	PA ID NO.	PROJECT NO.	DISASTER
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LOCATION/SITE	CATEGORY	PERIOD COVERING
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DESCRIPTION OF WORK PERFORMED

NAME	JOB TITLE	DATES AND HOURS WORKED EACH WEEK							COSTS				
		DATE							TOTAL HOURS	HOURLY RATE	BENEFIT RATE/HR	TOTAL HOURLY RATE	TOTAL COSTS
NAME		<b>REG.</b>											
JOB TITLE		<b>O.T.</b>											
NAME		<b>REG.</b>											
JOB TITLE		<b>O.T.</b>											
NAME		<b>REG.</b>											
JOB TITLE		<b>O.T.</b>											
NAME		<b>REG.</b>											
JOB TITLE		<b>O.T.</b>											

<b>TOTAL COSTS FOR FORCE ACCOUNT LABOR REGULAR TIME</b>		\$
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<b>TOTAL COST FOR FORCE ACCOUNT LABOR OVERTIME</b>		\$
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I CERTIFY THAT THE INFORMATION ABOVE WAS OBTAINED FROM PAYROLL RECORDS, INVOICES, OR OTHER DOCUMENTS THAT ARE AVAILABLE FOR AUDIT.

CERTIFIED	TITLE	DATE
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## **PAPERWORK BURDEN DISCLOSURE NOTICE**

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