DEPARTMENT OF HOMELAND SECURITY Federal Emergency Management Agency

FORCE ACCOUNT LABOR SUMMARY

PAPERWORK BURDEN DISCLOSURE NOTICE														
Public reporting burden for this data collection is estimated maintaining the data needed, and completing and submitt comments regarding the accuracy of the burden estimate	ng this for	m. You a	re not red	quired to	o respon	d to this	collection	n of inforr	mation unless a v	alid OMB cont	rol number is displa	yed on this form.	Send	
APPLICANT									DJECT #		DISASTER			
LOCATION/SITE									FEGORY		PERIOD COVERING			
DESCRIPTION OF WORK PERFORMED														
NAME	DATES AND HOURS WORKED EACH WEEK						WEEK	•	COSTS					
JOB TITLE	DATE								TOTAL HOURS	HOURLY RATE	BENEFIT RATE/HR	TOTAL HOURLY RATE	TOTAL COSTS	
NAME	REG.													
JOB TITLE	O.T.													
NAME	REG.													
JOB TITLE	О.Т.													
NAME	REG.													
JOB TITLE	О.Т.													
NAME	REG.													
JOB TITLE	O.T.													
TOTAL COSTS FOR FORCE ACCOUNT LABOR REGULAR TIME \$														
TOTAL COST FOR FORCE ACCOUNT LABOR OVERTIME												\$		
	ABOVE W	AS OBT	AINED F			L RECO	RDS, INV	OICES,	OR OTHER DO	CUMENTS TH	AI ARE AVAILAB			
CERTIFIED					ITLE							DATE		
FEMA Form FF-104-FY-21-137 (formerly 009-0-123 (3/22)	5)			I								I	Page 1 of 1	