

Forest Service Casual Hire and Payment Process - 2010
Attachment A

HIRING OFFICIAL –PRESEASON

1. Complete DHS Form I-9 and verify documents. (Incomplete forms will be returned) This form must be completed every 3 years and submitted by the hiring official. Refer to the ASC-IF web site for listing of each casual's last valid I-9 under reports titled "I-9 Dates". <http://fsweb.asc.fs.fed.us/bfm/programs/financial-operations/incident-business/CasualPay1.php>
2. Complete single resource casual hire information form, PMS 934
3. *Provide* casual:
 - Federal W-4 for completion.
 - State Tax Withholding Form (if Federal W-4 is utilized by the state, note State & Federal on the form.)
 - Direct Deposit Information and SF-1199a Direct Deposit Form.
4. Submit the originals of the following to ASC - IF at the time of completion.
 - DHS Form I-9 with signature verifying documents were reviewed (i.e. social security card, driver's license).
 - Federal W-4 completed and signed; resubmit only when information changes
 - State Tax Form completed and signed
 - SF-1199a Direct Deposit Form
 - Single Resource Casual Hire Information Form, PMS 934. **Use local Forest Unit Identifier-not Dispatch Office's.** NOTE -This is the "Hired At" information for Block 6 of OF-288.

CASUAL

1. Complete and submit the Direct Deposit Form SF-1199a to ASC-IF 101B Sun Avenue NE; Albuquerque, NM 87109 if the hiring unit has not already submitted previously or banking changes.
2. Complete Federal W-4, and State tax forms. The W-4 address will be used for the mailing of the W-2 forms. If forms are incomplete or filled out incorrectly, taxes will be withheld at the highest tax rate (marital status of single and zero exemptions) and the form will be returned to the casual. Taxes will be withheld from the "hired at" point (block 6 on the OF-288) in addition to the state identified by the casual. The casual needs to identify the state of residence on the W-4 or State tax form.
3. If your check mailing address and/or Direct Deposit information has changed since the last time you went out, update your W-4 with new address and/or Direct Deposit information.

HIRING OFFICIAL - AT TIME OF DISPATCH

1. Follow the direction above under "Hiring Official – Preseason" if not previously completed, or if changes need to be made and submit the originals immediately to ASC-IF.
- 2.-Complete Single Resource Casual Hire Information Form, PMS 934 indicating whether the I-9 & W-4 forms had been previously submitted and **attach a copy to the OF-288 unless Crew Manifest including positions is submitted with the Approving Memo.**

INCIDENT FINANCE SECTION OR HIRING UNIT

1. Record work time as outlined in the Interagency Incident Business Management Handbook assuring AD rate and TITLE is included in all columns.
2. Process partial payments every two weeks, indicating partial payment in the remarks section of the OF-288.
3. **Estimate return travel** and submit a copy of the Single Resource Casual Hire Information Form or Crew Manifest, and OF-288 to ASC-IF with Reviewing Official memo. Upon the casual's return, the hiring unit will prepare an OF-288 to adjust the Travel estimate if necessary.
4. If other agency hired the casual, submit Casual Hire Information Form and OF-288 to the hiring unit identified on the Casual Hire Information Form with applicable forms if not previously submitted.
5. I-Suite users: enter last 4 digits of SSN on the original OF-288 and export I-Suite data to the I-Suite repository daily (NOTE: original signed OF-288 should be submitted to ASC-IF with Reviewing Official memo for payment processing every two weeks).

INCIDENT FSC OR HIRING UNIT REVIEWING OFFICIAL

1. Audit OF-288 as outlined in attachment B.
2. Complete reviewing memo (Attachment C) on Casual Pay Website and check that timesheets meet the provisions outlined in the Pay Plan for Emergency Workers.

3. Mail FS hired casual documents to: **Casual Pay, USDA-Forest Service, ASC-IF 101B Sun Avenue NE, Albuquerque, NM 87109**

Forest Service – Emergency Firefighter Payments OF-288 Audit Procedures

Reviewing Official (designated by unit or Finance Section Chief) shall ensure the OF-288 – Fire Time Reports submitted for payment to the Casual Pay Center are casual hires and that the OF-288 is reviewed for the following:

Block 1: Name should **EXACTLY** match name on Social Security Card

Block 2. Social Security Number: Legible and matches I-9 and W-4. If OF-288 transmitted via I-Suite, enter last four digits only.

Block 4. Type of Employment: Verify individual is a Forest Service hired Casual. Do not submit an OF-288 for State or Local Government employees that will be paid by the State and billed back to the Forest Service. IMTs shall submit other agency hired casuals to the casual's hiring unit.

Block 6. Hired At: Unit Identifier Code for the location hired at, i.e., ID-BOF for Boise National Forest (Must be a Forest, not a Dispatch office)

Block 10. Name: Legible and shown **EXACTLY** as shown on the Social Security card.

Block 11. Address: Legible check mailing address – Casual Pay will use address previously submitted unless new W-4 is submitted.

Blocks 12 thru 14. City, State and Zip Code: Completed and legible

Block 20. Fire Location Identification Columns A thru D. **Following are critical fields to review:**

Column A	
1. Fire Name Spring Canyon Fire	
2. Fire No. OR-DEF-AZY2	3. Unit Code 0601
4. Fire Location DEF	5. State OR
6. Firefighter Classification FFT2 AD-C	7. Rate 13.24

- # 2 Fire Number. Check Incident Order Number i.e., OR-DEF-AZY2. This is the key field for financial data in the Casual Payment System.
- # 3 Unit Code: Unit Code of the incident unit, i.e., 0601 for Region 6, Deschutes NF
- # 4 Fire Location: Location the individual is working
- # 5 State: Enter State code i.e. OR
 - # 6 Firefighter Classification: Check AD class AND incident job title, i.e., AD-C FFT2
- # 7 Rate: Ensure AD rate is consistent with title as outlined in the Pay Plan for Emergency Workers. NOTE-Exception positions require a job description with each OF-288.
- #12. Time Officer's Signature: Completed and legible. **NOTE:** OF-288 with multiple fire assignments- a fire time officer signature is required on each column OF-288.
- The column totals and mathematical computations do not need to be audited.

Block 21. Section D Accounting Classification: Enter Job Code assigned to incident i.e., P4AZL3. Do not need to carry forward the rate, hours and totals unless there is more than one job code being charged.

Block 25. Employee Signature: Completed (If not available for signature annotate)

Block 26. Time Officer Signature: Completed and legible – only one time officer signature is required on each OF-288.

Staple multiple time sheets for the same individual together with the earliest dates on top and same incident numbers. Transmit to ASC-IF with letter from Reviewing Official memo. Incident units should keep a copy of the Emergency Firefighter Time Report (OF-288) for their records.

2009 Processing Emergency Firefighter Time Reports for Casuals Attachment C



**United States
Department of
Agriculture**

**Forest
Service**

Unit Name

Unit Address

File Code: 6540
Route To:

Date:

Subject: Payment of Casual Hire, Emergency Firefighter Time Reports

To:

USDA Forest Service
Albuquerque Service Center, B&F
Incident Finance Branch – Casual Pay (Mail via overnight mail)
101 B Sun Avenue NE
Albuquerque, NM 87109

Enclosed are the forms necessary for processing casual hire payrolls as follows:

Unique Unit "Batch Number" to track this payroll:

Example: (ID-BOF-001)

Number of OF-288's Mailed (count 1 for each name):

List of Casual Names submitted (attach list preferred for
>3 or 4):

****Crews must attach Crew Manifest including positions/job title and rate of pay.**

I have verified, attached, or have on file the following (mark the appropriate boxes):

- OF-288's have been audited, certified and attached, including signatures of the casual and the Time Officer.
- Original I-9's are completed and attached or have been previously submitted.
- Original W-4's for Federal withholding are complete and attached, or previously submitted.
- Original State withholding forms are complete, if required, and attached or previously submitted. If Federal W-4 is being used for State exemptions, "**the State name**" has been written on the W-4 or "**Fed and State**" has been written on the W-4.
- Incident name or project matches the job code assigned and the job code is established in FFIS for the incident region/unit indicated in Block 3 for each column of the OF-288.
- Transmitted via I-Suite _____(mm/dd/yy).
- Other (explain): _____

****Please list both Incident Team and Incident Unit Contacts, email address and phone numbers.**

If you have any questions, please contact:

Incident Contact	email	phone
Incident Unit Contact	email	phone

As approving official, I certify the enclosed OF-288's are accurate, appropriate, and legal for payment and meet the provisions of the Pay Plan for Emergency Workers.

PRINTED NAME AND SIGNATURE
Approving Officer /Finance Section Chief

Enclosures