

Emergency Firefighter Payments OF-288 Audit Procedures

Emergency Firefighter (casual) payroll will be processed from OF-288's with Original Time Officer Signature only; no copies or faxes.

Approving Official must verify the OF-288's, submitted for payment to the Casual Payment Center, are for casual hires and that the OF-288 is reviewed for the following:

- Block 2. Social Security Number: Legible and matches I-9 and W-4
- Block 4. Type of Employment: Verify individual is a casual.
- Block 6. Hired At: Unit Identifier Code for the location hired at, (i.e., ID-BOD for the Boise District)
- Block 10. Name: Legible
- Block 11 thru 14 Street Address City, State and Zip Code: Completed and legible (W-2's, checks, and Wage and Earning Statements (WES) will go to the address provided on the Federal W-4) *If the OF-288 address is different than the W-4 (address in the system), payment will be held and an inquiry will be made to avoid a possible lost check.
- Block 20, Columns A through D: **The following information is needed for payment:**
 - #1 Fire Name: If training or instructor write "Training" and/ or "Instructor or Lead Instructor" and indicate course number
 - #2 Fire No: Enter Incident Order Number or cost accounting data
 - #3 Unit Code: Unit Code of the hiring unit (Example (BLM – LLIDB00000) (BIA – C00440) (FWS – 41524) (NPS - 8804))
 - #6 Firefighter Classification: Check Position Code AND AD class (i.e., FFT2 AD-C). If Exception Position, include the description (example: THSP-Exception Position 3 and provide a brief description of the position duties, a requirement for payment).
 - #7 Rates: (i.e., \$13.64) Ensure AD rate is consistent with the Position Code as outlined in the AD Pay Plan for Emergency Workers.
 - #25 Employee Signature: Completed or noted "unavailable for signature"
 - #26 Time Officer Signature: Completed (Timesheet will not be processed without an Original Time Officer Signature)
 - The cost accounting data (Example (BLM - LLIDB00000-LF20000SP-HU0000-LFSPXXXX0000)
 - (BIA - C00440-08-92310-A1EK)(FWS - 41524-9141-AZA1)(NPS - 8804-E11-AZA1)) may be shown at the top of each column or:
 - in #2 of each column
 - in the Remarks block
 - in Block 21

It would be helpful for the CPC to receive batches in the following order:

For each individual, staple in order from top to bottom:

OF-288(s) with the earliest dates on top, misc forms, W-4, state forms, Direct Deposit.

Overnight mail to the Casual Payment Center with the Approving Official Memo stating the timesheets are correct and ready for payment (Timesheets will not be processed without the Approving Official Memo).

Emergency Firefighter Payments OF-288 Test Form Audit Procedures

Emergency Firefighter (casual) payroll will be processed from OF-288's with Original Time Officer Signature only; no copies or faxes.

Approving Official must verify the OF-288's, submitted for payment to the Casual Payment Center, are for casual hires and that the OF-288 is reviewed for the following:

- Block 1. Social Security Number: Legible and matches I-9 and W-4
- Block 2. Hired At: Unit Identifier Code for the location hired at, (i.e., ID-BOD for the Boise District)
- Block 3. Type of Employment: Verify individual is a casual.
- Block 4. Name: Legible
- Block 4,6,8-10 Street Address City, State and Zip Code: Completed and legible (W-2's, checks, and Wage and Earning Statement (WES) will go to the address provided on the Federal W-4) *If the OF-288 address is different than the W-4 (address in the system) payment will be held and an inquiry will be made to avoid a possible lost check.
- Columns A through D: **The following information is needed for payment:**
 - #1 Incident Name: If training or instructor write "Training" and/ or "Instructor or Lead Instructor" and indicate course number
 - #2 Incident Order / Resource Order No: Refer to agency specific guidelines
 - #3 Fire Code: (i.e., B2C5)
 - #4 Position Code: (i.e., FFT2) If Technical Specialist include the description (example: THSP- Camp Crew Squad Boss). If Exception Position, include the description (example: THSP-Exception Position 3 and provide a brief description of the position duties, a requirement for payment).
 - #5 AD Class: (i.e., AD-C) Ensure AD class is consistent with the Position Code as outlined in the AD Pay Plan for Emergency Workers.
 - #6 Rates: (i.e., \$13.64) Ensure AD rate is consistent with the Position Code as outlined in the AD Pay Plan for Emergency Workers.
 - #7 Home/Hiring Unit Accounting Code:
(Example (FWS – 41524-9141-AZA1) (BLM -) LLIDB00000-LF20000SP-HU0000-LFSPXXXX0000
(BIA – A15443-08-92310-B7TP) (NPS – 8804-E11-AZA1))
 - #15 Employee Signature: Completed or noted "unavailable for signature"
 - #17 Time Officer Signature: Completed (Timesheet will not be processed without an Original Time Officer Signature)

It would be helpful for the CPC to receive batches in the following order:

For each individual, staple in order from top to bottom:

OF-288(s) with the earliest dates on top, misc forms, W-4, state forms, Direct Deposit.

Overnight mail to the Casual Payment Center with the Approving Official Memo stating the timesheets are correct and ready for payment (Timesheets will not be processed without the Approving Official Memo).