



STATE OF VERMONT
JOINT FISCAL OFFICE

MEMORANDUM

To: Joint Fiscal Committee members
From: Sorsha Anderson, Staff Associate
Date: July 27, 2021
Subject: Grant Request – JFO #3058

Enclosed please find one (1) item, which the Joint Fiscal Office has received from the Administration.

JFO #3058 – One (1) limited-service position, Administrative Services Coordinator II, within the VT Military Department, Communications Division. The VT National Guard C4 Division will begin work with the National Guard Bureau Administrative Services to assist in records management at the national level. Local C4 staff will assist in VTARNG records management training, including training to other states. This position will assist with the increased day-to-day workload. This position is fully funded from previous JFO Grant #2948 and is valid through 9/30/2024.

[Received July 23, 2021]

Please review the enclosed materials and notify the Joint Fiscal Office (Sorsha Anderson: sanderson@leg.state.vt.us) if you have questions or would like this item held for legislative review. Unless we hear from you to the contrary by August 21, 2021, we will assume that you agree to consider as final the Governor's acceptance of this request.

STATE OF VERMONT
Joint Fiscal Committee Review
Limited Service - Grant Funded
Position Request Form

This form is to be used by agencies and departments when additional grant funded positions are being requested. Review and approval by the Department of Human Resources must be obtained prior to review by the Department of Finance and Management. The Department of Finance will forward requests to the Joint Fiscal Office for JFC review. A Request for Classification Review Form (RFR) and an updated organizational chart showing to whom the new position(s) would report must be attached to this form. Please attach additional pages as necessary to provide enough detail.

Agency/Department: Vermont Military Department Date: 05/28/2021

Name and Phone (of the person completing this request): David Henderson (802) 338-3314

Request is for:

- Positions funded and attached to a new grant.
- Positions funded and attached to an existing grant approved by JFO # JFO #2948

1. Name of Granting Agency, Title of Grant, Grant Funding Detail (attach grant documents):

National Guard Bureau, Master Cooperative Agreement, Appendix 14

2. List below titles, number of positions in each title, program area, and limited service end date (information should be based on grant award and should match information provided on the RFR) position(s) will be established only after JFC final approval:

Title* of Position(s) Requested # of Positions Division/Program Grant Funding Period/Anticipated End Date

Administrative Services Coordinator II - One (100% Federally funded) position within the Communications Division of the VT Military Department), Ltd. End date 9/30/24

*Final determination of title and pay grade to be made by the Department of Human Resources Classification Division upon submission and review of Request for Classification Review.

3. Justification for this request as an essential grant program need:

To provide continuity and support of document management administrative services for the Vermont Army National Guard C4 division. See the attached addendum for a more thorough justification.

I certify that this information is correct and that necessary funding, space and equipment for the above position(s) are available (required by 32 VSA Sec. 5(b)).

Kenneth W. Gragg Jr. Digitally signed by Kenneth W. Gragg Jr.
 Date: 2021.06.03 12:06:21 -04'00'

Signature of Agency or Department Head Digitally signed by Aimee Pope Date
Aimee Pope Date: 2021.06.11 13:57:29 -04'00'

Approved/Denied by Department of Human Resources Date

Adam Greshin Digitally signed by Adam Greshin
 Date: 2021.07.09 15:24:59 -04'00'

Approved/Denied by Finance and Management Date

Kristin Clouser Digitally signed by Kristin Clouser
 Date: 2021.07.12 17:23:00 -04'00'

Approved/Denied by Secretary of Administration Date

Approved/Denied by Governor (required as amended by 2019 Leg. Session) 7/21/21
 Date

Comments:

Administrative Services Coordinator II

Job Code: 089230

Pay Plan: Classified

Pay Grade: 22

Occupational Category: Admin. Svcs. HR and Fiscal Oper.

Effective Date: 02/14/2010

Class Definition:

Coordinates the administration of a variety of functions of a division, or moderately sized office. Evaluates and uses information to make recommendations; provide guidance on applying administrative requirements to varying situations; recommend changes to office procedures to adopt management decisions and policies; and identify problems in administrative workflow, evaluate and recommend alternative administrative processes. The work is assistive in nature and focuses on extending the capabilities of professional or managerial positions. Supervision may be exercised over a small staff of technical and/or clerical subordinates. Work is performed under the general supervision of an administrative superior.

Examples of Work:

Coordinates support and office functions. May supervise clerical or other support staff. May participate in the interviewing/hiring process of lower level clerical or support staff. Interprets rules, regulations and policies to all employees assigned to the office. Prepares and keeps complete inventory records. Prepares personnel documents. Serves as liaison with administrative staff concerning office, fiscal and personnel matters. Addresses all situations and resolves problems relating to the operation of the office. Resolves

personnel problems in the office. Represents office at meetings and seminars. Keeps time and attendance records. Maintains, monitors and may prepare budget and makes recommendations and requests regarding needs. Prepares and maintains office records and reports of moderate complexity. Answers routine correspondence as required. Performs related duties as required.

Environmental Factors:

Work is performed in a standard office setting.

Knowledge, Skills and Abilities:

Working knowledge of administrative principles and practices including supervisory techniques.

Working knowledge of accounting and budgeting practices.

Working knowledge of modern office management methods, including the application of automated data processing systems to office management problems.

Working knowledge of the principles and practices of personnel administration.

Working knowledge of computer technology and its application to automated systems.

Ability to read and correctly interpret laws, rules, and regulations of moderate complexity.

Ability to exercise discretion in interpreting and applying departmental policies, rules, and regulations.

Ability to communicate effectively orally and in writing.

Ability to establish and maintain effective working relationships.

Minimum Qualifications

High School diploma or equivalent AND three (3) years or more of experience providing administrative-level support to a business or organization.

OR

One year of full-time college level study in accounting, business or public administration, office administration or a related field AND two (2) years or more of experience providing administrative-level support to a business or organization.

OR

Two years of full-time college level study OR an associate's degree or higher in accounting, business or public administration, office administration or a related field AND one (1) year or more of experience providing administrative-level support to a business or organization.

OR

Three years or more of full-time college level study OR a bachelor's degree in accounting, business or public administration, office administration or a related field.

OR

One (1) year or more of experience as an Administrative Services Coordinator I with the State of Vermont.

NOTE: Only administrative work experience is qualifying. Administrative support includes those functions which keep the organization running or provide the resources for others to provide the programmatic work (e.g., accounting, budget management, grant administration, finance, human resources, payroll, purchasing, or space management).

Preferred Qualifications:

Special Requirements:

For some positions experience working with the VISION system (VISION is the State of Vermont PeopleSoft financial management system) may be required.

VERMONT DEPARTMENT OF PERSONNEL
**Request for Classification Review
Position Description Form A**

- **This form is to be used by managers and supervisors to request classification of a position (filled or vacant) when the duties have changed, and by managers and supervisors to request the creation of a new job class/title (for a filled, vacant, or new position), and by employees to request classification of their position.**
- This form was designed in Microsoft Word to download and complete on your computer. This is a form-protected document, so information can only be entered in the shaded areas of the form.
- If you prefer to fill out a hard copy of the form, contact your Personnel Officer.
- To move from field to field use your mouse, the arrow keys or press Tab. Each form field has a limited number of characters. Use your mouse or the spacebar to mark and unmark a checkbox.
- Where additional space is needed to respond to a question, you might need to attach a separate page, and number the responses to correspond with the numbers of the questions on the form. Please contact your Personnel Officer if you have difficulty completing the form.
- The form must be complete, including required attachments and signatures or it will be returned to the department's personnel office. All sections of this form are required to be completed unless otherwise stated.

INSTRUCTIONS: Tell us about the job. The information you provide will be used to evaluate the position. It will not be used in any way to evaluate an employee's performance or qualifications.

Answer the questions carefully. The information you give will help ensure that the position is fairly evaluated. Here are some suggestions to consider in completing this questionnaire:

- Tell the **facts** about what an employee in this position is actually expected to do.
- Give **specific examples** to make it clear.
- Write in a way so a person unfamiliar with the job will be able to understand it.
- Describe the job **as it is now**; not the way it was or will become.
- Before answering each question, read it carefully.

To Submit this Request for Classification Review: If this is a filled position, the employee must sign the original* and forward to the supervisor for the supervisor's review and signature. The Personnel Officer and the Appointing Authority must also review and sign this request before it is considered complete. The effective date of review is the beginning of the first pay period following the date the complete Request for Classification Review is date stamped by the Classification Division of the Department of Personnel.

*An employee may choose to sign the form, make a copy, submit original to supervisor as noted above, while concurrently sending the copy to the Classification Division, 144 State Street, Montpelier, with a cover note indicating that the employee has submitted the original to the supervisor and is submitting the copy as a **Concurrent** filing.

If this is a request (initiated by employees, VSEA, or management) for review of all positions in a class/title please contact the appropriate Classification Analyst or the Classification Manager to discuss the request prior to submitting.

Request for Classification Review Position Description Form A

For Department of Personnel Use Only

| | |
|--|-----------------------|
| Notice of Action # _____ | Date Received (Stamp) |
| Action Taken: _____ | |
| New Job Title _____ | |
| Current Class Code _____ | New Class Code _____ |
| Current Pay Grade _____ | New Pay Grade _____ |
| Current Mgt Level ____ B/U ____ OT Cat. ____ EEO Cat. ____ FLSA ____ | |
| New Mgt Level ____ B/U ____ OT Cat. ____ EEO Cat. ____ FLSA ____ | |
| Classification Analyst _____ | Date _____ |
| Comments: | Effective Date: _____ |
| | Date Processed: _____ |
| Willis Rating/Components: Knowledge & Skills: _____ | Mental Demands: _____ |
| Working Conditions: _____ | Accountability: _____ |
| | Total: _____ |

Incumbent Information:

Employee Name: Employee Number:
Position Number: Current Job/Class Title:
Agency/Department/Unit: Work Station: Zip Code:
Supervisor's Name, Title, and Phone Number:
How should the notification to the employee be sent: employee's work location or other address, please provide mailing address:

New Position/Vacant Position Information:

New Position Authorization: Request Job/Class Title:
Position Type: Permanent or Limited / Funding Source: Core, Partnership, or Sponsored
Vacant Position Number: Current Job/Class Title:
Agency/Department/Unit: Work Station: Zip Code:
Supervisor's Name, Title and Phone Number:

Type of Request:

- Management:** A management request to review the classification of an existing position, class, or create a new job class.
- Employee:** An employee's request to review the classification of his/her current position.

1. Job Duties

This is the **most critical** part of the form. Describe the activities and duties required in your job, **noting changes (new duties, duties no longer required, etc.) since the last review**. Place them in order of importance, beginning with the single most important activity or responsibility required in your job. The importance of the duties and expected end results should be clear, including the tolerance that may be permitted for error. Describe each job duty or activity as follows:

- **What** it is: The nature of the activity.
- **How** you do it: The steps you go through to perform the activity. Be specific so the reader can understand the steps.
- **Why** it is done: What you are attempting to accomplish and the end result of the activity.

For example a Tax Examiner might respond as follows: **(What)** *Audits tax returns and/or taxpayer records.* **(How)** *By developing investigation strategy; reviewing materials submitted; when appropriate interviewing people, other than the taxpayer, who have information about the taxpayer's business or residency.* **(Why)** *To determine actual tax liabilities.*

Coordinate and support office functions. Prepare and keep complete inventory of records. Prepare personnel documents. keep time and attendance. Maintain, monitor and prepare budget and make recommendations. Maintain office records and reports of moderate complexity. 1. Keep inventory of VTARNG records. 2. Prepare budget reports. 3. Maintain office records. 4. Manage publications and forms inventory and ordering. 5. Operate mail room. 6. Operate print shop. 7. Operate customer service desk. 8. Conduct records management classes. 9. Process FOIA cases.

2. Key Contacts

This question deals with the personal contacts and interactions that occur in this job. Provide brief typical examples indicating your primary contacts (**not** an exhaustive or all-inclusive list of contacts) other than those persons to whom you report or who report to you. If you work as part of a team, or if your primary contacts are with other agencies or groups outside State government describe those interactions, and what your role is. For example: you may *collaborate, monitor, guide, or facilitate change*.

They will be part of a team and also interact with the VTARNG full-time staff, and guardsman.

3. Are there licensing, registration, or certification requirements; or special or unusual skills necessary to perform this job?

Include any special licenses, registrations, certifications, skills; (such as counseling, engineering, computer programming, graphic design, strategic planning, keyboarding) including skills with specific equipment, tools, technology, etc. (such as mainframe computers, power tools, trucks, road equipment, specific software packages). Be specific, if you must be able to drive a commercial vehicle, or must know Visual Basic, indicate so.

N/A

4. Do you supervise?

In this question "supervise" means if you direct the work of others where you are held **directly** responsible for assigning work; performance ratings; training; reward and discipline or effectively recommend such action; and other personnel matters. List the names, titles, and position numbers of the classified employees reporting to you:

N/A

5. In what way does your supervisor provide you with work assignments and review your work?

This question deals with how you are supervised. Explain how you receive work assignments, how priorities are determined, and how your work is reviewed. There are a wide variety of ways a job can be supervised, so

there may not be just one answer to this question. For example, some aspects of your work may be reviewed on a regular basis and in others you may operate within general guidelines with much independence in determining how you accomplish tasks.

Work is performed under the general supervision of the administrative supervisor.

6. Mental Effort

This section addresses the mental demands associated with this job. Describe the most mentally challenging part of your job or the most difficult typical problems you are expected to solve. Be sure to give a specific response and describe the situation(s) by example.

- For example, a purchasing clerk might respond: *In pricing purchase orders, I frequently must find the cost of materials not listed in the pricing guides. This involves locating vendors or other sources of pricing information for a great variety of materials.*
- Or, a systems developer might say: *Understanding the ways in which a database or program will be used, and what the users must accomplish and then developing a system to meet their needs, often with limited time and resources.*

Evaluate and use information to make recommendations. Provide guidance on applying administrative requirements to varying situations. Recommend changes to office procedures and alternative processes.

7. Accountability

This section evaluates the job's expected results. In weighing the importance of results, consideration should be given to responsibility for the safety and well-being of people, protection of confidential information and protection of resources.

What is needed here is information not already presented about the job's scope of responsibility. What is the job's most significant influence upon the organization, or in what way does the job contribute to the organization's mission?

Provide annualized dollar figures if it makes sense to do so, explaining what the amount(s) represent.

For example:

- A social worker might respond: *To promote permanence for children through coordination and delivery of services;*
- A financial officer might state: *Overseeing preparation and ongoing management of division budget: \$2M Operating/Personal Services, \$1.5M Federal Grants.*

The Administrative Services Departments plays a key role in the overall mission of the Vermont National Guard maintaining a mail system, print production and the vital role of records management.

8. Working Conditions

The intent of this question is to describe any adverse conditions that are routine and expected in your job. It is not to identify special situations such as overcrowded conditions or understaffing.

- a) What significant mental stress are you exposed to? All jobs contain some amount of stress. If your job stands out as having a significant degree of mental or emotional pressure or tension associated with it, this should be described.

| Type | How Much of the Time? |
|---------------------------------------|-----------------------|
| Office environment work/computer work | 25% |

| | |
|--------------------------------------|-----|
| Records Management | 50% |
| Mail, Pubs accounts and forms manger | 25% |

- b) What hazards, special conditions or discomfort are you exposed to? (Clarification of terms: **hazards** include such things as potential accidents, illness, chronic health conditions or other harm. Typical examples might involve exposure to dangerous persons, including potentially violent customers and clients, fumes, toxic waste, contaminated materials, vehicle accident, disease, cuts, falls, etc.; and **discomfort** includes exposure to such things as cold, dirt, dust, rain or snow, heat, etc.)

| Type | How Much of the Time? |
|------|-----------------------|
| N/A | |
| | |
| | |

- c) What weights do you lift; how much do they weigh and how much time per day/week do you spend lifting?

| Type | How Heavy? | How Much of the Time? |
|------------------------|------------|-----------------------|
| Lifting Boxes of paper | 50lbs | 5% |
| Lifting boxes of forms | 25lbs | 5% |

- d) What working positions (sitting, standing, bending, reaching) or types of effort (hiking, walking, driving) are required?

| Type | How Much of the Time? |
|----------|-----------------------|
| Sitting | 50% |
| Standing | 50% |

Additional Information:

Carefully review your job description responses so far. If there is anything that you feel is important in understanding your job that you haven't clearly described, use this space for that purpose. Perhaps your job has some unique aspects or characteristics that weren't brought out by your answers to the previous questions. In this space, add any additional comments that you feel will add to a clear understanding of the requirements of your job.

| |
|--|
| Assist in teaching records management to the VTARNG. |
|--|

Employee's Signature (**required**): _____ Date: _____

Supervisor's Section:

Carefully review this completed job description, but **do not** alter or eliminate any portion of the original response. Please answer the questions listed below.

1. What do you consider the most important duties of this job and why?

Ability to establish and maintain effective working relationships, with co-workers and customers.
Because it makes for a good working environment for the whole team and the customers.

2. What do you consider the most important knowledge, skills, and abilities of an employee in this job (not necessarily the qualifications of the present employee) and why?

Good customer service and attention to detail.

3. Comment on the accuracy and completeness of the responses by the employee. List below any missing items and/or differences where appropriate.

N/A

4. Suggested Title and/or Pay Grade:

Admin Services Coord II Pay Grade 22

Supervisor's Signature (**required**): EVANS.CHRISTOPHE
R.SCOTT.1013303300 Digitally signed by
EVANS.CHRISTOPHER.SCOTT.10133033
00
Date: 2021.05.27 09:46:41 -04'00' Date: 5/27/2021

Personnel Administrator's Section:

Please complete any missing information on the front page of this form before submitting it for review.

Are there other changes to this position, for example: Change of supervisor, GUC, work station?

Yes No If yes, please provide detailed information.

Attachments:

- Organizational charts are **required** and must indicate where the position reports.
- Draft job specification is **required** for proposed new job classes.

Will this change affect other positions within the organization? If so, describe how, (for example, have duties been shifted within the unit requiring review of other positions; or are there other issues relevant to the classification review process).

N/A

Suggested Title and/or Pay Grade:

Admin Services Coord II Pay Grade 22

Personnel Administrator's Signature (**required**): Roxanne Royce Digitally signed by Roxanne Royce
Date: 2021.06.02 15:14:40 -04'00' Date: _____

Appointing Authority's Section:

Please review this completed job description but **do not alter** or eliminate any of the entries. Add any clarifying information and/or additional comments (if necessary) in the space below.

N/A

Suggested Title and/or Pay Grade:

As above

Kenneth W. Gragg Jr. Digitally signed by Kenneth W. Gragg Jr.
Date: 2021.06.03 12:07:54 -04'00'

Appointing Authority or Authorized Representative Signature (**required**)

_____ Date

STATE OF VERMONT

Joint Fiscal Committee Review

Limited Service - Grant Funded

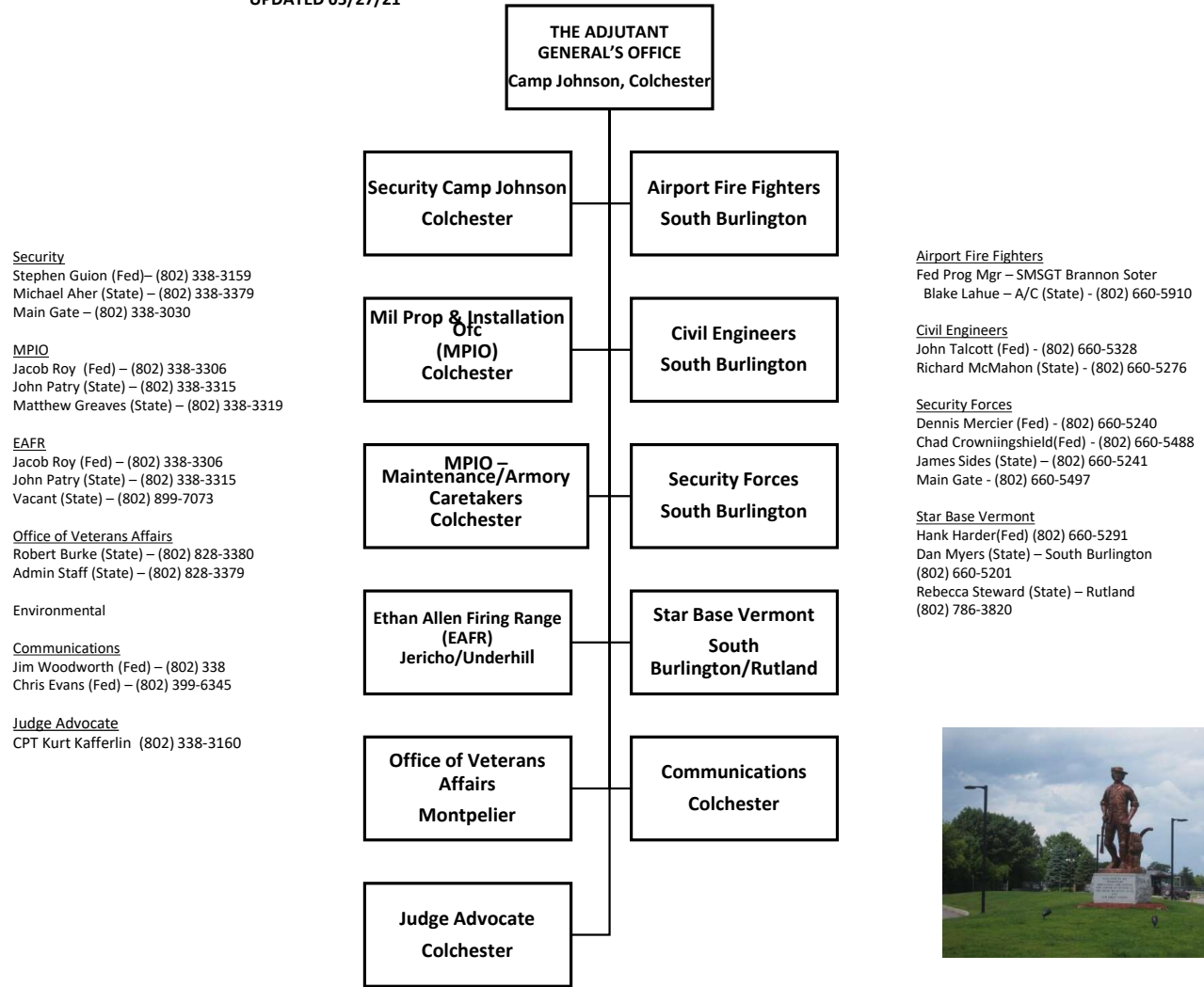
Position Request Form

Addendum – Question #3: Justification for this request as an essential grant program need:

The Vermont National Guard C4 Division has started working with the NGB program manager for Admin Services to assist in records management at the National level by forming a National charter that includes all 7 regions in the country to assist other states with their records management training. The Local C4 staff, to include the current state employee will be assisting in training all the VTARNG force in records management and training to other states down the road. So that is why we are requesting another state employee to cover the day-to-day operations in Admin Services. We will be starting to get very busy soon.

STATE OF VERMONT MILITARY DEPARTMENT

UPDATED 05/27/21

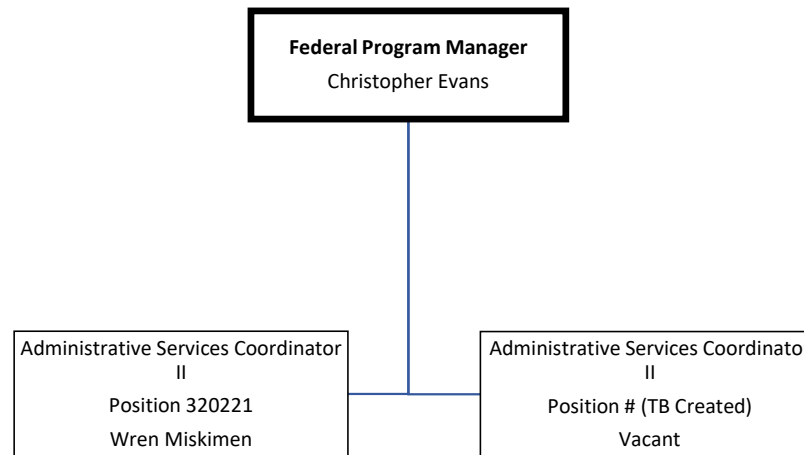


Communications Division – VT Military Department

Updated: 5/27/21



Federal Program Manager
Christopher Evans – (802) 339-6345



APPENDIX 14 ARNG ADMINISTRATIVE SERVICES ACTIVITIES

Section 1401. General.

a. This Appendix to the Master Cooperative Agreement (MCA) prescribes the terms, conditions and administrative procedures related to the National Guard Bureau's (NGB) Federal contribution for Administrative Services Activities for the Army National Guard.

b. Statements of Facts: The authorities and provisions set forth in ~~NGR-5-4~~ PARC policy, the former NGR 5-1, or successor CNGB instruction and manual are incorporated into this Appendix by reference.

Section 1402. Additional Definitions:

Commercial Printing: Any procurable printing and reproduction requirements solicited or obtained from any source other than the supporting GPO procurement office or supporting DAPS.

Section 1403. Office of Primary Responsibility.

a. The Office of Primary Responsibility for this appendix is the Army National Guard Facilities Branch (ARNG-CSO-F), National Guard Bureau, Army National Guard Readiness Center 111 S. George Mason Dr. Arlington, Virginia 22204.

b. Chief ARNG Facilities Branch, for the purpose of this Appendix, is the designee of the Chief, National Guard Bureau, and is the individual authorized to make final approval of all program budgets and modifications to them and to the language of this Appendix, to authorize distribution of funds to the USPFO, to receive specified accounting reconciliation reports, and to take any other action on behalf of the NGB, as specifically reserved under this Appendix for ARNG-CSO-F. The Program Manager, Admin Services, acts on behalf of the Chief ARNG Facilities Branch in the daily administration of this Appendix

Section 1404. Scope of Agreement.

a. Scope of Services. The State shall provide assistance in the performance of Document Management Administrative Services.

b. Performance Specifications. Performance specifications are based on the authorized activities of Section 1405 of this Appendix.

Section 1405. Authorized Charges/Activities.

a. Personnel.

1. Payments for state employee salaries, to include approved overtime, and allowable benefits in accordance with state personnel policy for the payment of salary and benefits of like state government positions within the same geographic area. If a state has a pay raise, pay freeze, or pay cap, a hiring freeze or employee furloughs for like positions throughout the state, then state employees under this appendix will have corresponding limitations. When there is no like state government position available, salaries and benefits will be equivalent to a comparable grade and series Federal Civil Service position in the geographic area.

2. Costs for regular overtime that is required by Fair Labor Standards Act (FLSA), based on the work schedule authorized by the SMD, will be allowed and funded in each budget cycle. Scheduled overtime should be avoided. When operational requirements or personnel circumstances dictate additional staffing in support of the mission, ARNG-CSO-F may authorize scheduled overtime to satisfy minimum staffing requirements.

b. Authorized Activities are those where the Grantee provides assistance in accomplishing the following Document Management Services to include:

1. Assistance in Records Management to include, receiving, storage, Records Holding Area (RHA) operations, cataloging, and retrieval.
2. Assistance in Official Mail and Distribution, and Locator Management, receiving, reporting and distribution.
3. Assistance in Copier Management to include collection of expenditure data, production data, assembling data for reporting consumption.
4. Assistance in Forms and Publications Management.
5. Assistance in Field printing and reproduction facilities, when approved by ARNG-CSO-F, and chartered to support printing and reproduction requirements.

Section 1406. Unauthorized Charges/Activities.

- a. All charges/activities not authorized in Section 1405 above unless approved by ARNG-CSO-F prior to execution.
- b. Reimbursement to the state for any "commercially" procured printing services or products.
- c. Reimbursement to the state for copier services to include rental, lease, purchase, or maintenance.

Section 1407. Budget Requirements.

- a. State Operating Budget.
 1. ARNG-CSO-F shall provide Admin Services Base Operations Annual Funding Guidance (AFG) to the State CA PM. The CA PM shall identify an Approved Budget Amount for the FY to cover projected Base Operations Administrative Services costs by area authorized by this agreement. Base Operations Funding used outside the agreement shall also be identified by program area. ARNG-CSO-F shall review and approve or disapprove the State CA PM Administrative Services budget.
 2. Changes the CA PM makes to the budget during the fiscal year do not require ARNG-CSO-F approval as long as the supported areas do not change.
 3. Funding Priorities. When a cooperative agreement is used available Base Ops funding AFG/AFP must be prioritized as follows:
 - A. First Priority: Charges associated with Official Mail, Distribution and Locator Management.
 - B. Second Priority: Records Management, Forms, and Publications management.
 - C. Third Priority: Authorized High Speed Duplication electronic printing, (excludes commercial procurement).
 - D. All other
 4. Additional federal funds may be provided and directly cited in this agreement provided the MDEP and AMSCO permit the procurement of the service. The CA PM for the Administrative Services Appendix will include these estimates and funds in his budget submission to ARNG-CSO-F.
- b. Budget Reports. The CA PM shall submit requested financial or budget reports that NGB Office of Primary Responsibility may require.

Section 1408. Appendix Administration.

The State must submit a written request, in accordance with PARC policy, the former Chapter 3 NGR 5-1, to change the instructions, terms, or conditions of this Appendix. The request will not take effect, nor can any expenditure of funds so implied therein take place, until it receives the approval of NGB. The request shall not be binding unless it is so approved and shall be on an instrument containing the signatures of both the USPFO and TAG, or authorized designees.

Section 1409. Funding Limitation.

a. Approved Budget/Annual Funding Program (AFP): The total dollar amount that NGB anticipates, subject to the availability of funds, being available for reimbursement to the State for its costs in fulfilling its responsibilities under this Appendix. This amount may be increased or decreased by NGB during the fiscal year.

b. Total Dollars Obligated: The total amount of funds obligated for NGB's share under this Appendix. Only funds obligated through an executed CA modification to this appendix are available for reimbursement to the State. Funds shall be obligated to this Appendix as received by the CA PM. The following funding limitations are provided for each fiscal year as it occurs:

| | | |
|---|---|---|
| 1. Fiscal Year FY19: Federal Share (100%) | Approved Budget/(AFP) \$ <u>80,000.00</u> | Total Dollars Obligated \$ _____ |
| 2. Fiscal Year _____: Federal Share (100%) | Approved Budget/(AFP) \$ _____ | Total Dollars Obligated \$ _____ |
| 3. Fiscal Year _____: Federal Share (100%) | Approved Budget/(AFP) \$ _____ | Total Dollars Obligated \$ _____ |
| 4. Fiscal Year _____: Federal Share (100%) | Approved Budget/(AFP) \$ _____ | Total Dollars Obligated \$ _____ |
| 5. Fiscal Year _____: Federal Share (100%) | Approved Budget/(AFP) \$ _____ | Total Dollars Obligated \$ _____ |

Section 1410. Agreement Particulars.

The information below shall be recorded by the Grants Officer's Representative (GOR) for compliance with the reporting requirements of the DoD Assistance Award Action Report System (DAADS) and the Federal Funding Accountability and Transparency Act of 2006, as amended.

- a. Grantee/Recipient Category: Government
- b. Grantee/Recipient Type: State Government
- c. Grantee/Recipient DUNS: 070980243
- d. Primary Place of Performance (if different from 'Issued To' on CA Modification Form):
Vermont National Guard, 789 National Guard Road, Colchester, Vermont 05446-3099
(To include Zip + 4)
- e. Grantee/Recipient County
(Primary Place of Performance): Chittenden County
- f. Grantee/Recipient Congressional District
(Primary Place of Performance): At Large
- g. Major Agency: DOD
- h. Agency Code: 2100
- i. Funding Agency: Army
- j. Program Source Agency: 21
- k. Transaction Type: Cooperative Agreement
- l. CFDA: 12.401
- m. CFDA Program Title: Operation and Maintenance,
Army National Guard
- n. Program Source Account-Funding: 2065
- o. Treasury Appropriation Code: 2065
- p. Award/Obligation/Action Date: 1 Oct 2018
- q. Starting Date: 30 Sep 2019
- r. Ending Date: indef
- s. Record Type: Individual Action
- t. Fiscal Year/Quarter: FY19/1st Quarter
- u. Unique Federal Award Identification Number (FAIN) W912LN-19-2-1014
- v. Approved Budget Amount: See Appendix, Section 509
- w. R&D Award (Yes or No) No
- x. Indirect Cost Rate or CPP Rate: 0%




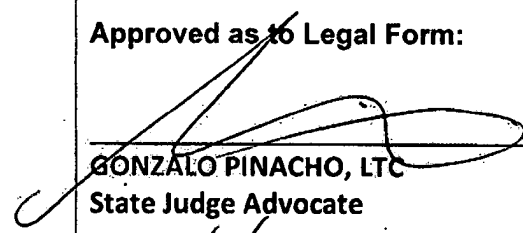
Section 1410. Agreement Particulars.

The information below shall be recorded by the Grants Officer's Representative (GOR) for compliance with the reporting requirements of the DoD Assistance Award Action Report System (DAADS) and the Federal Funding Accountability and Transparency Act of 2006, as amended.

- a. Grantee/Recipient Category: Government
- b. Grantee/Recipient Type: State Government
- c. Grantee/Recipient DUNS: 070980243
- d. Primary Place of Performance (if different from 'Issued To' on CA Modification Form): Vermont National Guard, 789 National Guard Road, Colchester, Vermont 05446-3099
(To include Zip + 4)
- e. Grantee/Recipient County (Primary Place of Performance): Chittenden County
- f. Grantee/Recipient Congressional District (Primary Place of Performance): At Large
- g. Major Agency: DOD
- h. Agency Code: 2100
- i. Funding Agency: Army
- j. Program Source Agency: 21
- k. Transaction Type: Cooperative Agreement
- l. CFDA: 12.401
- m. CFDA Program Title: Operation and Maintenance, Army National Guard
- n. Program Source Account-Funding: 2065
- o. Treasury Appropriation Code: 2065
- p. Award/Obligation/Action Date: 1 Oct 2018
- q. Starting Date: 30 Sep 2019
- r. Ending Date: indef
- s. Record Type: Individual Action
- t. Fiscal Year/Quarter: FY19/1st Quarter
- u. Unique Federal Award Identification Number (FAIN) W912LN-19-2-1014
- v. Approved Budget Amount: See Appendix, Section 509
- w. R&D Award (Yes or No) No
- x. Indirect Cost Rate or CPP Rate: 0%

EXECUTION

IN WITNESS WHEREOF: The parties, by their signatures, execute this Appendix and agree to its terms and conditions.

| | |
|---|---|
| <p>STATE/TERRITORY/ OR DISTRICT OF:</p> <hr/> <p>BY:  STEVEN A. CRAY, MAJOR GENERAL The Adjutant General - VT</p> <p><u>18 October 18</u> (Date)</p> | <p>NATIONAL GUARD BUREAU:</p> <p>BY:  JOHN H. ABELING, COLONEL, NGB USPFO - VT</p> <p><u>18 Oct 18</u> (Date)</p> |
| <p>Approved as Legal Form:</p> <p> JACOB A. HUMBERT Assistant Attorney General for Vermont</p> <p><u>15 OCT 2018</u> (Date)</p> | <p>Approved as to Legal Form:</p> <p> GONZALO PINACHO, LTC State Judge Advocate</p> <p><u>10/4/18</u> (Date)</p> |