



Interagency Mobile Shower Facilities
Daily Shower Order/Invoice

Form 1276-C (7/99)
Previous editions obsolete

NFES 2054

EXAMPLE/INSTRUCTIONS FOR USING 1276-C AND 1276-D

Submit originals through Contractor to: **BOISE NATIONAL FOREST**

1249 S. Vinnell Way
Boise, Idaho 83709
Attn: F & A

DEFINITIONS:

"Blue Book" - Interagency Mobile Food Services and Mobile Shower Facilities, NFES # 1276. Can be ordered from the NIFC Warehouse, 3833 S. Development, Boise, Idaho 83705.

"Pink Pages" - Mobile Shower Facilities Unit Summary (found in the Blue Book), as a minimum, the Contractor, contract number, address, phone numbers, locations, equipment and prices.

EXAMPLE

On 6/22/99, Logistics Support ordered from the Shower Wagon, one shower unit (#S-1) and one optional potable water vehicle (#820).

1276-C

1. Information **ALL PAYMENTS UNDER THESE CONTACTS ARE MADE BY THE BNF**
2. **Contractor Name, Address and Vender Express Number:** The Shower Wagon, 1000 1st Street N., Boise, Idaho 83701, Vender Express Number: 53 153567849 3.
3. **Contract Number:** 53-024B-9-200
4. **Invoice Date:** 6/22/99
5. **Shower ID No:** S-1
6. **Invoice No:** 1-99
7. **Incident Name:** Dog Fire
8. **Job Code:** 1801
9. **Resource Order No:** E-159233

Request No: E-17

Benefiting Unit, Region/Agency: Gifford Pinchot NF

- 11-12. **Unit Description/Unit No:** Shower Facility #S-1, Water Vehicle #S-1(W1); Optional Water Vehicle is #820 and after arriving at incident, an additional optional water vehicle was voluntarily delivered and subsequently ordered (#830).
13. **Location:** From Home to Timbuktu for Unit #S-1 and #820.
14. **Mileage:** 87 miles from Home to Timbuktu for #S-1 and #820.
Price: \$8.00/mile for #S-1 and \$3.50/mile for #820
15. **Usage and Prices:** One day's usage for #S-1 at \$1600/day; #830 signed up and in service at 1800

- 16 **Relocation Fee:** #S-1 was relocated 5 miles to another location on the Dog Fire.
- 17 **Transporting Water:** Twice on 6/22/99, #S-1(W1) transported water from the nearest water source (150 miles round trip) for dust abatement at camp at \$2.40/mile. #820 made four trips to the same water source and returned for supplying potable water to the kitchen and available for filling canteens at the incident at \$2.40/mile; #830 made three trips to the water source and returned at \$2.40/mile.
- 18 **Intermittent Use:** #S-1(W1) was used on an intermittent basis to provide dust abatement in camp from

20. **TOTAL:** Enter total for Miscellaneous Charges and Credits from 1276-D.
21. **TOTAL INVOICE AMOUNT:** Self-explanatory
22. **Remarks:** A voluntarily delivered optional water vehicle was ordered at the incident site #830.
23. **Government Representatives** must sign and print their names, title, work address and phone number. **PAYMENT CANNOT BE PROCESSED WITHOUT A SIGNATURE FROM AN AUTHORIZED REPRESENTATIVE.**
- 24 **Contractor Representatives** must sign and print their name, title and phone number. **PAYMENT CANNOT BE PROCESSED WITHOUT A SIGNATURE**

1. Paying Unit		2. Contractor Name, Address			3. Contract Number		4. Invoice Date		5. Shower ID No		6. Invoice No	
DAILY SHOWER		Boise National Forest			53-024B-9-200		6/22/99		S-1		1-99	
ORDER/INVOICE		1249 S. Vinnell Way			The Shower Wagon		7. Incident Name		8. Job Code		9. Resource Order	
MOBILE SHOWER FACILITIES		Boise, Idaho 83709			1000 1st Street N		Dog Fire		1801		E-159233	
		Attn: F&A			Boise, Idaho 83701		10. Benefiting Unit, Region/Agency				Request No.	
		Vender Express Number:			53 153567849 3		Gifford Pinchot NF				E-17	
SHOWER FACILITIES UNIT DISPATCHED BY THE GOVERNMENT TO AN INCIDENT												
11. Unit	12. Unit	13. Location	14. Mileage	15. Usage	16. Relocation Fee	17. *Transportation H2O	18. *Intermittent Use	19. TOTALS				
Description	Unit	From To	Miles Price	Days Price	# Moves Fee Miles Price	Miles Price	Times Price	FOR	AMOUNT			
Shower Facility	S-1	From Home To Timbuktu	87 \$8.00	1 \$1600	1 \$400 5 \$8.00	600 \$ 2.40		MILEAGE	\$ 696.00			
Water Vehicle Only	W1	From To				300 \$ 2.40	3 \$40	USAGE	\$1600.00			
								RELOC FEE	\$ 440.00			
								TRANSP H2O	\$ 720.00			
								INTER USE	\$ 120.00			
OPTIONAL WATER VEHICLE OR HAND WASHING STATION DISPATCHED BY THE GOVERNMENT TO AN INCIDENT												
Unit	Unit	Location	Mileage	Usage	Relocation Fee	*Transportation H2O	*Intermittent Use	TOTALS				
Description	No.	From To	Miles Price	Days Price	# Moves Fee Miles Price	Miles Price	Time Price	FOR	AMOUNT			
Optional Water Vehicle	820	From Home To Timbuktu	87 \$3.50	1 \$650		600 \$ 2.40		MILEAGE	\$ 304.50			
Optional Hand Washing Station		From To						USAGE	\$ 650.00			
								MILEAGE	\$1440.00			
								USAGE	\$			
								TRANSP H2O	\$			
OPTIONAL WATER VEHICLE OR HAND WASHING STATION VOLUNTARILY DELIVERED TO AN INCIDENT AND SUBSEQUENTLY ORDERED												
Unit	Unit	Location	Mileage	Usage	Relocation Fee	*Transportation H2O	*Intermittent Use	TOTALS				
Description	No.	From To	Miles Price	Days Price	# Moves Fee Miles Price	Miles Price	Time Price	FOR	AMOUNT			
Optional Water Vehicle	830	From To		1 / 2 \$700		450 \$ 2.40		USAGE	\$ 350.00			
Optional Hand Washing Station		From To						TRANSP H2O	\$1080.00			
								USAGE	\$			
								TRANSP H2O	\$			
								20. MISCELLANEOUS CHARGES AND CREDITS (total from 1276-D)		\$-900.00		
								21. TOTAL INVOICE AMOUNT		\$ 6470.20		
22. Remarks						23. I certify that the above mentioned services have been received (Government Representative)						
6/22 - #830 inspected and signed up at 1800						Names (print and sign), Title, Work Address and Phone						
						/ s /						
						24. I certify this bill is correct and payment has not been received (Contractor Representative)						
						Name (print and sign), Title and Phone						
						/ s /						
						1276-C (7/99)						

DAILY SHOWER ORDER/INVOICE MOBILE SHOWER FACILITIES	1. Paying Unit Boise National Forest 1249 S. Vinnell Way Boise, Idaho 83709 Attn: F&A	2. Contractor Name, Address Vender Express Number :	3. Contract Number 53-024B-	4. Invoice Date / /	5. Shower ID No	6. Invoice No
			7. Incident Name	8. Job Code	9. Resource Order	
			10. Benefiting Unit, Region/Agency	Request No.		

SHOWER FACILITIES UNIT DISPATCHED BY THE GOVERNMENT TO AN INCIDENT

11. Unit Description	12. Unit	13. Location	14. Mileage		15. Usage		16. Relocation Fee				17. *Transportation H2O		18. *Intermittent Use		19. TOTALS		
			Miles	Price	Days	Price	# Moves	Fee	Miles	Price	Miles	Price	Time	Price	FOR	AMOUNT	
Shower Facility		From To		\$		\$		\$400								MILEAGE	\$
Water Vehicle Only		From To										\$		\$		RELOC FEE	\$
																TRANSP H2O	\$
																INTER USE	\$

OPTIONAL WATER VEHICLE OR HAND WASHING STATION DISPATCHED BY THE GOVERNMENT TO AN INCIDENT

Unit Description	Unit No.	Location	Mileage		Usage		Relocation Fee				* Transportation H2O		*Intermittent Use		TOTALS		
			Miles	Price	Days	Price	# Moves	Fee	Miles	Price	Miles	Price	Time	Price	FOR	AMOUNT	
Optional Water Vehicle		From To		\$		\$										MILEAGE	\$
Optional Hand Washing Station		From To		\$		\$										MILEAGE	\$
																USAGE	\$
																TRANSP H2O	\$

OPTIONAL WATER VEHICLE OR HAND WASHING STATION VOLUNTARILY DELIVERED TO AN INCIDENT AND SUBSEQUENTLY ORDERED

Unit Description	Unit No.	Location	Mileage		Usage		Relocation Fee				* Transportation H2O		*Intermittent Use		TOTALS		
			Miles	Price	Days	Price	# Moves	Fee	Miles	Price	Miles	Price	Time	Price	FOR	AMOUNT	
Optional Water Vehicle		From To				\$										USAGE	\$
Optional Hand Washing Station		From To				\$										TRANSP H2O	\$

*Transporting Water and Intermittent Use Miles, Time and Rates from 1276-D

20. MISCELLANEOUS CHARGES AND CREDITS (total from 1276-D) \$

21. TOTAL INVOICE AMOUNT \$

22. Remarks	23. I certify that the above mentioned services have been received (Government Representative)
	Names (print and sign), Title, Work Address and Phone
	24. I certify this bill is correct and payment has not been received (Contractor Representative)
	Name (print and sign), Title and Phone

1276-C (7/99)

DAILY SHOWER ORDER/INVOICE MOBILE SHOWER FACILITIES	1. Paying Unit Boise National Forest 1249 S. Vinnell Way Boise, Idaho 83709 Attn: F&A	2. Contractor Name, Address Vender Express Number :	3. Contract Number 53-024B-	4. Invoice Date / /	5. Shower ID No	6. Invoice No
			7. Incident Name	8. Job Code	9. Resource Order	
			10. Benefiting Unit, Region/Agency	Request No.		

SHOWER FACILITIES UNIT DISPATCHED BY THE GOVERNMENT TO AN INCIDENT

11. Unit Description	12. Unit	13. Location	14. Mileage		15. Usage		16. Relocation Fee				17. *Transportation H2O		18. *Intermittent Use		19. TOTALS		
			Miles	Price	Days	Price	# Moves	Fee	Miles	Price	Miles	Price	Time	Price	FOR	AMOUNT	
Shower Facility		From To		\$		\$		\$400								MILEAGE	\$
Water Vehicle Only		From To										\$		\$		RELOC FEE	\$
																TRANSP H2O	\$
																INTER USE	\$

OPTIONAL WATER VEHICLE OR HAND WASHING STATION DISPATCHED BY THE GOVERNMENT TO AN INCIDENT

Unit Description	Unit No.	Location	Mileage		Usage		Relocation Fee				* Transportation H2O		*Intermittent Use		TOTALS		
			Miles	Price	Days	Price	# Moves	Fee	Miles	Price	Miles	Price	Time	Price	FOR	AMOUNT	
Optional Water Vehicle		From To		\$		\$										MILEAGE	\$
Optional Hand Washing Station		From To		\$		\$										MILEAGE	\$
																USAGE	\$
																TRANSP H2O	\$

OPTIONAL WATER VEHICLE OR HAND WASHING STATION VOLUNTARILY DELIVERED TO AN INCIDENT AND SUBSEQUENTLY ORDERED

Unit Description	Unit No.	Location	Mileage		Usage		Relocation Fee				* Transportation H2O		*Intermittent Use		TOTALS		
			Miles	Price	Days	Price	# Moves	Fee	Miles	Price	Miles	Price	Time	Price	FOR	AMOUNT	
Optional Water Vehicle		From To				\$										TRANSP H2O	\$
Optional Hand Washing Station		From To				\$										USAGE	\$
																TRANSP H2O	\$

*Transporting Water and Intermittent Use
Miles, Time and Rates from 1276-D

20. MISCELLANEOUS CHARGES AND CREDITS (total from 1276-D) \$

21. TOTAL INVOICE AMOUNT \$

22. Remarks	23. I certify that the above mentioned services have been received (Government Representative)
	Names (print and sign), Title, Work Address and Phone
	24. I certify this bill is correct and payment has not been received (Contractor Representative)
	Name (print and sign), Title and Phone

CONTRACTOR

DAILY SHOWER ORDER/INVOICE MOBILE SHOWER FACILITIES	1. Paying Unit Boise National Forest 1249 S. Vinnell Way Boise, Idaho 83709 Attn: F&A	2. Contractor Name, Address Vender Express Number :	3. Contract Number 53-024B-	4. Invoice Date / /	5. Shower ID No	6. Invoice No
			7. Incident Name	8. Job Code	9. Resource Order	
			10. Benefiting Unit, Region/Agency			Request No.

SHOWER FACILITIES UNIT DISPATCHED BY THE GOVERNMENT TO AN INCIDENT

11. Unit Description	12. Unit	13. Location	14. Mileage		15. Usage		16. Relocation Fee				17. *Transportation H2O		18. *Intermittent Use		19. TOTALS		
			Miles	Price	Days	Price	# Moves	Fee	Miles	Price	Miles	Price	Time	Price	FOR	AMOUNT	
Shower Facility		From To		\$		\$		\$400								MILEAGE	\$
Water Vehicle Only		From To										\$		\$		RELOC FEE	\$
																TRANSP H2O	\$
																INTER USE	\$

OPTIONAL WATER VEHICLE OR HAND WASHING STATION DISPATCHED BY THE GOVERNMENT TO AN INCIDENT

Unit Description	Unit No.	Location	Mileage		Usage		Relocation Fee				* Transportation H2O		*Intermittent Use		TOTALS		
			Miles	Price	Days	Price	# Moves	Fee	Miles	Price	Miles	Price	Time	Price	FOR	AMOUNT	
Optional Water Vehicle		From To		\$		\$										MILEAGE	\$
Optional Hand Washing Station		From To		\$		\$										MILEAGE	\$
																USAGE	\$
																TRANSP H2O	\$

OPTIONAL WATER VEHICLE OR HAND WASHING STATION VOLUNTARILY DELIVERED TO AN INCIDENT AND SUBSEQUENTLY ORDERED

Unit Description	Unit No.	Location	Mileage		Usage		Relocation Fee				* Transportation H2O		*Intermittent Use		TOTALS		
			Miles	Price	Days	Price	# Moves	Fee	Miles	Price	Miles	Price	Time	Price	FOR	AMOUNT	
Optional Water Vehicle		From To				\$										TRANSP H2O	\$
Optional Hand Washing Station		From To				\$										USAGE	\$
																TRANSP H2O	\$

*Transporting Water and Intermittent Use
Miles, Time and Rates from 1276-D

20. MISCELLANEOUS CHARGES AND CREDITS (total from 1276-D) \$

21. TOTAL INVOICE AMOUNT \$

22. Remarks	23. I certify that the above mentioned services have been received (Government Representative)
	Names (print and sign), Title, Work Address and Phone
	24. I certify this bill is correct and payment has not been received (Contractor Representative)
	Name (print and sign), Title and Phone

DAILY SHOWER ORDER/INVOICE MOBILE SHOWER FACILITIES	1. Paying Unit Boise National Forest 1249 S. Vinnell Way Boise, Idaho 83709 Attn: F&A	2. Contractor Name, Address Vender Express Number :	3. Contract Number 53-024B-	4. Invoice Date / /	5. Shower ID No	6. Invoice No
			7. Incident Name	8. Job Code	9. Resource Order	
			10. Benefiting Unit, Region/Agency			Request No.

SHOWER FACILITIES UNIT DISPATCHED BY THE GOVERNMENT TO AN INCIDENT

11. Unit Description	12. Unit	13. Location	14. Mileage		15. Usage		16. Relocation Fee				17. *Transportation H2O		18. *Intermittent Use		19. TOTALS		
			Miles	Price	Days	Price	# Moves	Fee	Miles	Price	Miles	Price	Time	Price	FOR	AMOUNT	
Shower Facility		From To		\$		\$		\$400								MILEAGE	\$
Water Vehicle Only		From To										\$		\$		RELOC FEE	\$
																TRANSP H2O	\$
																INTER USE	\$

OPTIONAL WATER VEHICLE OR HAND WASHING STATION DISPATCHED BY THE GOVERNMENT TO AN INCIDENT

Unit Description	Unit No.	Location	Mileage		Usage		Relocation Fee				* Transportation H2O		*Intermittent Use		TOTALS		
			Miles	Price	Days	Price	# Moves	Fee	Miles	Price	Miles	Price	Time	Price	FOR	AMOUNT	
Optional Water Vehicle		From To		\$		\$										MILEAGE	\$
Optional Hand Washing Station		From To		\$		\$										MILEAGE	\$
																USAGE	\$
																TRANSP H2O	\$

OPTIONAL WATER VEHICLE OR HAND WASHING STATION VOLUNTARILY DELIVERED TO AN INCIDENT AND SUBSEQUENTLY ORDERED

Unit Description	Unit No.	Location	Mileage		Usage		Relocation Fee				* Transportation H2O		*Intermittent Use		TOTALS		
			Miles	Price	Days	Price	# Moves	Fee	Miles	Price	Miles	Price	Time	Price	FOR	AMOUNT	
Optional Water Vehicle		From To				\$										TRANSP H2O	\$
Optional Hand Washing Station		From To				\$										USAGE	\$
																TRANSP H2O	\$

*Transporting Water and Intermittent Use Miles, Time and Rates from 1276-D

20. MISCELLANEOUS CHARGES AND CREDITS (total from 1276-D) \$

21. TOTAL INVOICE AMOUNT \$

22. Remarks	23. I certify that the above mentioned services have been received (Government Representative)
	Names (print and sign), Title, Work Address and Phone
24. I certify this bill is correct and payment has not been received (Contractor Representative)	Name (print and sign), Title and Phone

DAILY SHOWER ORDER/INVOICE MOBILE SHOWER FACILITIES	1. Paying Unit Boise National Forest 1249 S. Vinnell Way Boise, Idaho 83709 Attn: F&A	2. Contractor Name, Address Vender Express Number :	3. Contract Number 53-024B-	4. Invoice Date / /	5. Shower ID No	6. Invoice No
	7. Incident Name		8. Job Code	9. Resource Order Request No.		
	10. Benefiting Unit, Region/Agency					

SHOWER FACILITIES UNIT DISPATCHED BY THE GOVERNMENT TO AN INCIDENT

11. Unit Description	12. Unit	13. Location	14. Mileage		15. Usage		16. Relocation Fee				17. *Transportation H2O		18. *Intermittent Use		19. TOTALS		
			Miles	Price	Days	Price	# Moves	Fee	Miles	Price	Miles	Price	Time	Price	FOR	AMOUNT	
Shower Facility		From To		\$		\$		\$400									MILEAGE \$
Water Vehicle Only		From To										\$		\$			RELOC FEE \$
																	TRANSP H2O \$
																	INTER USE \$

OPTIONAL WATER VEHICLE OR HAND WASHING STATION DISPATCHED BY THE GOVERNMENT TO AN INCIDENT

Unit Description	Unit No.	Location	Mileage		Usage		Relocation Fee				* Transportation H2O		*Intermittent Use		TOTALS		
			Miles	Price	Days	Price	# Moves	Fee	Miles	Price	Miles	Price	Time	Price	FOR	AMOUNT	
Optional Water Vehicle		From To		\$		\$											MILEAGE \$
Optional Hand Washing Station		From To		\$		\$											USAGE \$
																	TRANSP H2O \$

OPTIONAL WATER VEHICLE OR HAND WASHING STATION VOLUNTARILY DELIVERED TO AN INCIDENT AND SUBSEQUENTLY ORDERED

Unit Description	Unit No.	Location	Mileage		Usage		Relocation Fee				* Transportation H2O		*Intermittent Use		TOTALS		
			Miles	Price	Days	Price	# Moves	Fee	Miles	Price	Miles	Price	Time	Price	FOR	AMOUNT	
Optional Water Vehicle		From To				\$											USAGE \$
Optional Hand Washing Station		From To				\$											TRANSP H2O \$

*Transporting Water and Intermittent Use
Miles, Time and Rates from 1276-D

20. MISCELLANEOUS CHARGES AND CREDITS (total from 1276-D) \$

21. TOTAL INVOICE AMOUNT \$

22. Remarks	23. I certify that the above mentioned services have been received (Government Representative)
	Names (print and sign), Title, Work Address and Phone
	24. I certify this bill is correct and payment has not been received (Contractor Representative)
	Name (print and sign), Title and Phone

