

Alignment and Allowability Form					
Submit to: EMD_HSGP@michigan.gov				MSP/EMHSD Tracking Number:	
Part V - REIMBURSEMENT REPORTING					
Equipment and Training Reporting *** Required for ALL Equipment and Training Reimbursements***					
5.A Equipment or Training:	5.B NIMS Typed Discipline or State/Local Discipline/Community of Interest Supported:	5.C NIMS Typed Resource Supported:	5.D NIMS Typed Number:	5.E # of Personnel Trained for NIMS Typed Teams:	5.F # of Typed Teams Trained:
5.G State/Local Typed Resource Supported (If applicable):	5.H Typed Equipment Purchased:	5.I Comments:			
Project Activity Reporting *** Required for ALL Solution Areas***					
5.J Organization(s):			5.K Organization(s) Zip Code:		
5.L Amount Expended:					
5.M Completed Activities:					