POHNPEI STATE GOVERNMENT
FIELD DEPLOYMENT & ALLOWANCE AGREEMENT

I: PARTIES

This Agreement is made by and between the Pohnpei State Government, hereinafter referred to as the "Government," through Department of Treasury and Administration], and employee_____, holding the official position of _____], hereinafter referred to as the "Employee."

II: PURPOSE AND AUTHORITY

Pursuant to Section 6.7 (Change of Duty Station) and Part 19 (Benefits and Allowances) of the Pohnpei State Public Service System Regulations, this Agreement establishes a simplified system to disburse flat-rate domestic field operational allowances. This contract is explicitly executed to bypass the standard decentralized Travel Authorization (TA) form requirements for necessary, short-term, or rotational civil service duties conducted within the statutory state borders of Pohnpei but outside the employee's standard base duty station (the main island of Pohnpei).

III: SCOPE OF DOMESTIC WORK AND FIELD ASSIGNMENT

The Employee is authorized to perform localized domestic assignments as detailed below:

- Target Field Jurisdiction: [e.g., Pohnpei Forest/remote/distant locations, marine sanctuaries, municipal waters, outer islands and applicable remote areas of Pohnpei, etc.]

  _____.
- Authorized Field Duties: [e.g., Marine resource monitoring, aquaculture assessments, fish catch surveys, road infrastructure checks, land boundary surveys, forest mapping, topographic data collection, or any municipal technical support/assessment or assigned duties].

  _____.
- Effective Period: From _____, 20___ to _____, 20___.

IV: DISBURSEMENT AND ALLOWANCE SPECIFICATIONS

The Department of Treasury and Administration shall disburse operational allowance to the Employee as follows and in pursuant to section VI of this agreement:

1. Field Subsistence Allowance Rate: $ _____ per [Day / Week / Deployment Pay Period]
2. Maximum Total Contract Cap: $_____.
3. Disbursement Method: [ ] 80% Advance, 20% disbursement upon submission of close out report.

V: EMPLOYEE CONDITIONS AND RESPONSIBILITIES

1. The Employee explicitly certifies that they will remain within the legal state boundaries of Pohnpei during the authorized period.
2. The Employee agrees that these funds cover all localized logistics, field meals, basic remote shelter arrangements, and incidental land/sea transit between localized field sectors.
3. the Employee shall submit a brief Field Log or localized Trip Report summarizing accomplishments to the department head within ten (10) working days of the assignment's completion.

VI: ADVANCE AND DISBURSEMENT STRUCTURE

In accordance with the financial thresholds permitted for local advance distributions under the Pohnpei State Financial Management Regulations, funds under this Agreement shall be distributed strictly using at Mobilization Advance (80%). Upon final signing and execution of this agreement by all authorized parties, the Department of Treasury and Administration shall release eighty percent (80%) of the total contract cap to the Employee to handle forward logistics, field operational setup, meals, and basic remote shelter arrangements.

Remaining twenty percent (20%) of the total contract value shall be withheld by the State Treasury and released to the Employee upon successful completion of the deployment services and subsequent approval of all closeout reports required in Section V.

VII: DISCIPLINARY COMPLIANCE, RECOVERY, AND TAXATION

Any unauthorized departure from the field jurisdiction, falsification of field hours, or use of public money for unapproved private gain will result in the immediate termination of this Agreement, mandatory payroll deductions to recover disbursed state funds, and formal adverse action under Part 17 of the Public Service System Regulations.

VIII: GOVERNING LAW

This Agreement is governed by, construed, and enforced in accordance with the laws, code, and constitution of Pohnpei State and the Federated States of Micronesia.

IN WITNESS WHEREOF, the parties execute this agreement on the dates below.

_____ Signature:_____ Date:_____
Immediate Supevisor
Allottee/Requesting Official

_____ Signature:_____ Date:_____
Employee Name

_____ Signature:_____ Date:_____
Director
DOTA
Pohnpei State Government