INSTRUCTIONS: Use this form when a single information collection document involves multiple public reporting and recordkeeping requirements. The totals of the figures in cols. (D), (F), (H), (I) and (K) should be entered in item 13 of OMB 83-i. For cols. (E), (G), & (J), the averages of the totals shall be computed, as follows, and then entered on the OMB 83-i.

TITLE OF INFORMATION COLLECTION DOCUMENT

13th Periodic Amendment - Importation of Fruits and Vegetables

OMB NO. 0579- 0264

DATE PREPARED

4-15-2008

..1.....OF......

(F) Total (F) Total (F) Total (F) Total (I) Total (II) Total (

IDENTIFICATION OF REPORTING OR RECORDKEEPING REQUIREMENT				ANNUAL BURDEN							
SECTION OF REGULATIONS	DESCRIPTION	FORM NO(S). (If "none", so state)	REPORTS					RECORDS			
			NO. OF RESPON- DENTS	NO. OF RESPONSE PER RESPON- DENT	TOTAL ANNUAL RESPONSES (Col. D x E)	HOURS PER RESPONSE	TOTAL HOURS (Col. F x G)	NO. OF RECORD KEEPERS	ANNUAL HOURS PER RECORD- KEEPER	TOTAL RECORD- KEEPING HOURS (Col. I x J)	
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	
	Phytosanitary Certificates (foreign)	None	6	39.00	234	0.250	59				
	(businesss)										
	(foreign gov't)		6	39.00	234	0.250	59				
										_	
319.56-44	Trapping records (mexico)	None						10	0.250	3	
	(foreign gov't)										
319.56-44	Compliance agreement	None	3	1.00	3	0.500	2				
	(business)	10110					_				
								Ì			
								,_		_	
			15		481		123	10		3	

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(H) Total

(F) Total

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= (G) Average (K) Total = (J) Average 4-15-2008 (D) Total (F) Total IDENTIFICATION OF REPORTING OR RECORDKEEPING REQUIREMENT ANNUAL BURDEN **REPORTS RECORDS** FORM NO(S). NO. OF RESPONSE PER TOTAL ANNUAL HOURS TOTAL RECORD-(If "none", SECTION OF ANNUAL NO. OF **HOURS** TOTAL NO. OF DESCRIPTION so state) PER **KEEPING** REGULATIONS **RESPON-**RESPONSES PER **HOURS** RECORD RESPON-RECORD-KEEPER HOURS (Col. D x E) DENTS RESPONSE **KEEPERS** (Col. F x G) (Col. I x J) DENT (B) (D) (E) (G) (H) (K) (A) (F) (I) (C) (J) 471 120

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= (G) Average (K) Total (F) Total (H) Total

= (J) Average

4-15-2008 (D) Total (F) Total IDENTIFICATION OF REPORTING OR RECORDKEEPING REQUIREMENT **ANNUAL BURDEN REPORTS RECORDS** FORM NO(S). NO. OF RESPONSE TOTAL **ANNUAL** TOTAL RECORD-(If "none", HOURS **SECTION OF ANNUAL** NO. OF **HOURS** TOTAL NO. OF DESCRIPTION so state) PER PER **KEEPING** REGULATIONS **RESPON-**RESPONSES PER **HOURS** RECORD RESPON-RECORD-HOURS (Col. D x E) DENTS **RESPONSE** (Col. F x G) **KEEPERS** DENT KEEPER (Col. I x J) (B) (E) (G) (H) (A) (D) (F) (I) (K) (C) (J) None 59 319.56-13, 319.56-44 Phytosanitary Certificates (foreign) 6 39.00 234 0.250 (businesss) (foreign gov't) 6 39.00 234 0.250 59 319.56-44 Trapping records (mexico) None 10 0.250 (foreign gov't) 3 319.56-44 Compliance agreement None 1.00 0.500 (business) 15 481 123 10

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