

FORM NO. OR OTHER IDENTIFICATION (A)	TOTAL ANNUAL RESPONSES (B)	AVE. TIME PER RESPONSE (C)	TOTAL HOURS PER YEAR (B x C) (D)	ESTIMATED ANNUAL PROGRAM COSTS FOR COLLECTING, PROCESSING, ANALYZING, TABULATING AND/OR PUBLISHING THE INFORMATION COLLECTED (Do NOT include administrative costs such as printing, and mailing of forms, etc.)			OVERHEAD COSTS (Col. F times .139) (G)	TOTAL COSTS (F + G) (H)	REMARKS (I)
				GRADE AND AVERAGE HOURLY RATE OF PROGRAM PERSON(S) INVOLVED IN THE INFORMATION COLLECTION (Include field AND headquarters personnel. Use step 4 for average hourly rate.) (E)	PROGRAM COSTS (D X E) (F)				
Phytosanitary Certificates	40	0.01600	1	GS- 12	\$ 35.19	\$ 35.19	\$	\$	
					35.19		4.89	40.08	

