



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.)

9-Apr-10

OMB Control No.  
 0579-0020

U.S. ORIGIN HEALTH CERTIFICATE

Form No. or Other Identification	Total Annual Responses	Avg. Time Per Responses	Total Hours Per Year	Persons Involved in the Information Collection*		Program Costs	Overhead Costs	Total Costs	Remarks	
				Grade (GS)	Avg. Hourly Rate					
(A)	(B)	(C)	(D)	(B x C)	(E.1)	(E.2)	(D x (E.2))	(F x 0.139)	(F + G)	(I)

APHIS FORM 79

