INSTRUCTIONS: Use this form when a single information collection document involves multiple reporting and recordkeeping requirements. The totals of the figures in cols. should be entered in item 13 of OMB-83-1: cols. (D) &/or (I) = 13a (respondent is only counted once); cols. F & I = 13b; cols. H & K = 13c.

TITLE OF INFORMATION COLLECTION DOCUMENT

Farmers' Market Promotion Program

OMB NO. 0581-NEW

(F)Total/(D)Total = (E)Average (H)Total/(F)Total = (G)Average

DATE PREPARED

(K)Total/(I)Total = (J)Average

NOTE: The columns will calculate automatically. If Col. E's response is something other than annually, i.e., 1/6 years, list as "1/6" & decimal will display.

USDA-AMS

years, list as "1/6" & decimal will display.									January 10, 2011	
IDENTIFIC		ANNUAL BURDEN								
		REPORTS						RECORDS		
SECTION OF REGS.	DESCRIPTION	FORMS NO (S) (If "none" so state)	NO. OF RESPONDENTS	NO OF RESPONSES PER RESPONDENT	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)	(1)	(J)	(K)
	Supplemental Budget Summary Form and InstructionsFor EBT Projects (Note: Voluntary form; burden hours included under the Project Proposal Narrative)	TM-31	0	1.0000	0.00		0.00			0.00
	FMPP Grant Progrom, General Terms and Conditions (Note: Mandartory form; approved under OMB-0581-0235 burden hours accounted for under the Project Grant Agreement)	TM-34	0	1.0000	0.00	12.6700	0.00			0.00
	United States Department of Agriculture, Agricultural Marketing Service, Agreement Face Sheet (for grant awardees)	AMS-33	200	1.0000	200.00	2.0000	400.00			0.00
	AMS Conflict of Interest and Confidentiality Statement For Grant Reviewers (for grant reviewer)	AMS-34	75	1.0000	75.00	1.0000	75.00			0.00
	FMPP Grant Peer Reviewer Qualifications Template (for grant reviewers)	TM-32	75	1.0000	75.00	1.0000	75.00			0.00
	FMPP Reviewer Declaration of Intent (for grant reviewers)	TM-33	75	1.0000	75.00	0.1600	12.00			0.00
	SUBTOTAL				425.00	17	562.00	0.00		0.00
	TOTAL OF ALL PAGES				4,925.00	25	11,437.00	0.00		0.00
TOTAL - COLUMNS "F" AND "I" = OMB 831, 13 b; COLUMNS "H" AND "K" = OMB 831, 13c					4,925.00	25	11,437.00			

INSTRUCTIONS: Use this form when a single information collection document involves multiple reporting and recordkeeping requirements. The totals of the figures in cols. should be entered in item 13 of OMB-83-1: cols. (D) &/or (I) = 13a (respondent is only counted once); cols. F & I = 13b; cols. H & K = 13c.

TITLE OF INFORMATION COLLECTION DOCUMENT Farmers' Market Promotion Program, page 2 OMB NO.

0581-NEW

(F)Total/(D)Total = (E)Average (H)Total/(F)Total = (G)Average(K)Total/(I)Total = (J)Average

NOTE: The columns will calculate automatically. If Col. E's response is something other than annually, i.e., 1/6

DATE PREPARED

years, list as "1/6" & decimal will display.

January 10, 2011

Ĺ										Janua	ry 10, 2011
	IDENTIFICATION OF REPORTING OR RECORDKEEPING REQUIREMENT			ANNUAL BURDEN							
					REPORTS					RECORDS	
											TOTAL
	CECTION OF	DECORPORTION	FORMS NO (S)	NO. OF	NO OF	TOTAL ANNUAL	HOURS	TOTAL	NO. OF	ANNUAL	RECORD-
	SECTION OF REGS.	DESCRIPTION	(If "none" so state)	RESPONDENTS	RESPONSES PER	RESPONSES (Col. D x E)	PER RESPONSE	HOURS (Col. F x G)	RECORD- KEEPERS	HOURS PER RECORD-	KEEPING HOURS (Col. I x J)
	REGS.		SU State)		RESPONDENT	(Coi. D x E)	RESPONSE	(Coi. F X G)	REEPERS	KEEPER	(Col. 1 x 3)
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(1)	(J)	(K)
		Written proof of eligibility (for applicants)	None	1,500	1.0000	1,500.00	0.5000	750.00			0.00
		Registration with the Central Contractor Registry (for applicants)	None	1,500	1.0000	1,500.00	0.7500	1,125.00			0.00
		Farmers Market Promotion Program (FMPP) Guidelines (for applicants)	None	1,500	1.0000	1,500.00	6.0000	9,000.00			0.00
											0.00
											0.00
											0.00
		SUBTOTAL				4,500.00	7.2500	10,875.00	0		0.00

SUMMARY OF INFORMATION COLLECTION USDA-AMS