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

Local Food Promotion Program

омв NO. 0581-0287

DATE PREPARED

June 6, 2014

(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

IDENTIFIC	CATION OF REPORTING OR RECORDKEEPING REQUIREMENT		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)	
	Registration with SAM.gov (OMB 3090-0290)	None	1,500	1.00		1.00	1,500.00	()	(0)	0.00	
	LFPP Request for Applications Announcement and Program Guidelines	None	1,500	1.00	1,500.00	6.00	9,000.00			0.00	
	LFPP Grant Narrative and Instructions	None	1,500	1.00	1,500.00	10.00	15,000.00			0.00	
	LFPP Project Budget and Match Request	None	1,500	1.00	1,500.00	0.50	750.00			0.00	
	Written Proof of Eligibility	Written	1,500	1.00	1,500.00	0.50	750.00			0.00	
	LFPP Verification Letter(s) of Matching Funds	Written	1,500	1.00	1,500.00	2.00	3,000.00			0.00	
	Peer Reviewer Application and Qualifcation Form for FMLFPP (Burden increase for FMPP included.)	None	150	1.00	150.00	0.25	37.50			0.00	
	AMS Conflict of Interest and Confidentiality Statement For Grant Reviewers (Burden increase for FMPP included.)	AMS-34	150	1.00	150.00	1.00	150.00			0.00	
	LFPP Grant Program, General Terms and Conditions (TM-34 FMPP Grant Program General Terms and Conditions document included as a sample. LFPP Form still under development.)	None	300	1.00	300.00	1.00	300.00			0.00	
	SUBTOTAL Page 1				9,600.00		30,487.50				
	TOTAL OF ALL PAGES				10,500.00		34,687.50	300.00	0.00	300.00	
тот	AL - COLUMNS "F" AND "I" = OMB 831, 13 b; COLUMNS "H" AND "K" = OMB 831, 13c				10,800.00		34,987.50				

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recordkeeping requirements. The totals of the figures in cols. should be entered in item 13 of OMB-83-1:	
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TITLE OF INFORMATION COLLECTION DOCUMENT

local Food Promotion Program Request, page 2

OMB NO. 0581-0287

DATE PREPARED

June 6, 2014

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

IDENTIFI	CATION OF REPORTING OR RECORDKEEPING REQUIREMENT		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)	(I)	(J)	(K)		
	Grant Agreement - United States Department of Agriculture, Agricultural Marketing Service, Agreement Face Sheet	AMS-33	300	1.00	300.00	2.00	600.00					
	LFPP Interim Performance Report	None	300	1.00	300.00	4.00	1,200.00					
	LFPP Final Performance Report	None	300	1.00	300.00	8.00	2,400.00			0.0		
	Recordkeeping	None			0.00		0.00	300	1.000	300.0		
	SUBTOTAL Page 2				900.00		4,200.00	300		300.0		
	Forms and Burden Approved Under Other OMB Numbers											
	SF-424 Application for Federal Assistance (Common form approved under OMB#4040-0004)	SF-424	1,500	1.00	1,500.00	1.00	1,500.00					
	SF-424B Assurances-Non-Construction Program (Common form approved under OMB#4040-0007)	SF-424B	1,500	1.00	1,500.00	0.25	375.00			0.0		
	SF-270 Request for Advance or Reimbursement (Common form approved under OMB#4040-0012)	SF-270	200	3.00	900.00	1.00	900.00			0.0		
	SF-425 Federal Financial Report (Common form approved under OMB#4040-0014)	SF-425	200	2.00	500.00	1.50	750.00			0.		
	SUBTOTAL				4,400.00		3,525.00	0		0.0		

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

IDENTIFICATION OF REPORTING OR RECORDKEEPING REQUIREMENT			ANNUAL BURDEN								
				REPORTS					RECORDS		
SECTION OF	DESCRIPTION	FORMS NO (S) (If "none"	NO. OF RESPONDENTS	NO OF RESPONSES	TOTAL ANNUAL RESPONSES	HOURS PER	TOTAL HOURS	NO. OF RECORD-	ANNUAL HOURS PER	TOTAL RECORD- KEEPING HOURS	
REGS.		so state)		PER RESPONDENT	(Col. D x E)	RESPONSE	(Col. F x G)	KEEPERS	RECORD- KEEPER	(Col. I x J)	
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(1)	(J)	(K)	
	Forms and Burden Approved Under Other OMB Numbers									0.00	
	SF-424 Application for Federal Assistance (Approved under OMB#4040-0004)	SF-424	1,500	1.0000	1,500.00	1.0000	1,500.00			0.00	
	SF-424B Assurances-Non-Construction Program (Approved under OMB#0348-0040)	SF-424B	1,500	1.0000	1,500.00	0.2500	375.00			0.00	
	SF-270 Request for Advance or Reimbursement (Approved under OMB#0348- 0004)	SF-270	200	3.0000	900.00	0.7800	702.00			0.00	
	SF-425 Federal Financial Report (Approved under OMB#0348-0061)	SF-425	200	2.0000	500.00	1.5000	750.00			0.00	
					0.00		0.00			0.00	
	SUBTOTAL				4,400.00		3,327.00	0		0.00	