OMB Control No. 0579-0579-XXXX

							0579-XXXX		
Form No. or Other Identification	Total Annual Responses	Avg. Time Per Responses	Total Hours Per Year	Persons Informati	Involved in the on Collection*	Program Costs	Overhead Costs	Total Costs	Remarks
			(B x C)	Grade (GS)	Avg. Hourly Rate	(D x (E.2))	(F x 0.139)	(F + G)	
(A)	(B)	(C)	(D)	(E.1)	(E.2)	(F)	(G)	(H)	(I)
			0			\$0	\$0	\$0	
			0			\$0	\$0	\$0	
			0			\$0	\$0	\$0	
			0			\$0	\$0	\$0	
Phytosanitary Certificate	12	0.50	6	GS-11	\$32.92	\$198	\$27	\$225	
			0			\$0	\$0	\$0	
			0			\$0	\$0	\$0	
			0			\$0	\$0	\$0	
			0			\$0	\$0	\$0	
			0			\$0	\$0	\$0	
			0			\$0	\$0	\$0	
			0			\$0	\$0	\$0	
			0			\$0	\$0		
			0			\$0	\$0	\$0	
			0			\$0	\$0	\$0	
			0			\$0	\$0	\$0	
			0			\$0	\$0	\$0	
			0			\$0	\$0	\$0	
			0			\$0	\$0	\$0	
			0			\$0	\$0		
			0			\$0	\$0		
			0			\$0	\$0		
			0			\$0	\$0		
			0			\$0	\$0		
			0			\$0	\$0		
			0			\$0	\$0		
			0			\$0	\$0		
			0			\$0	\$0		
			0			\$0	\$0		
			0			\$0	\$0		
			0			\$0	\$0		
			0			\$0	\$0		
			0			\$0	\$0	\$0	

OMB Control No. 0579-0579-XXXX

	Form No. or Other Identification	Total Annual Responses		Total Hours Per Year		Involved in the on Collection*	Program Costs	Overhead Costs	Total Costs	Remarks
				(B x C)	Grade (GS)	Avg. Hourly Rate	(D x (E.2))	(F x 0.139)	(F + G)	
	(A)	(B)	(C)	(D)	(E.1)	(E.2)	(F)	(G)	(H)	(I)
Totals				6			\$198	\$27	\$225	

APHIS FORM 79

^{*}Includes field and headqarters personnel.