

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.)

OMB Control No.
 0579-XXXX

Conditions for Payment of Highly Pathogenic Avian Influenza Indemnity Claims

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)	(E.1)	(E.2)	(D x (E.2))	(F x 0.139)	(F + G)	(I)
			(B x C)						

APHIS FORM 79

*Includes field and headquarters personnel.

