OMB Control No. Date 8-Aug-17

JOHNES DISEASE INTERSTATE MOVEMENT

D.GOELDNER/K.JARRED

0579-0338

| JOHNES DISEASE INTERSTATE MOVEMENT | | D.GOELDNER/K.JARRED | | | 0579-0338 | | | | | |
|------------------------------------|--------------|---------------------|-----------|-------------|-------------------------|------------------|-------------|-------------|-------------|------------|
| Form No. | | | Avg. Time | | | | | | | |
| or Other | | Total Annual | Per | Total Hours | Persons Involved in the | | Program | Overhead | | |
| Identification | | Responses | Responses | Per Year | Information Collection* | | Costs | 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) |
| Permit for Movement of Restrict | cted Animals | 3 | 0.25 | 1 | 14 | \$59.04 | \$44 | \$6 | \$50 | |
| Owner-Shipper Statement | | 3 | 0.25 | 1 | 14 | \$59.04 | \$44 | \$6 | \$50 | |
| Official Eartags | | 3 | 0.25 | 1 | 14 | \$59.04 | \$44 | \$6 | \$50 | , |
| Request for Permission to Mov | /e | 1 | 0.25 | 0 | 14 | \$59.04 | \$15 | \$2 | \$17 | |
| | | | | 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 | \$0 | \$0 | |
| | | | | 0 | | | \$0 | \$0 | \$0 | |
| | | | | 0 | | | \$0 | \$0 | \$0 | |
| Totals | | | | 3 | | | \$148 | \$21 | \$168 | |
| I | | | | _ | | | , | 7 | , | |

APHIS FORM 79

^{*}Includes field and headqarters personnel.