INSTRECTIONSE USCALLY of the far singrebation delication to the conduction of the co	THORE OF THE OFFICE COLLECTION DOCUMENT	омв No . Раде 1 of 5
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.	Farm and Food Worker Relief (FFWR) Grant Program	0581-0331
(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.		February 16, 2021

									1 COT tita	1y 10, 2021
IDENTIFI	ICATION OF REPORTING OR RECORDKEEPING REQUIREMENT					AN	NUAL 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)
	STANDARDIZED FORMS FOR ALL AMS GRANT PROGRAMS (Line entry represents totals only for FFWR) (NEW)	(6)	(0)	(-)	0.00		0.00	()	(9)	0.00
	Request for Applications (RFA) (Reading)	None	40	1.0000	40.00	4.0000	160.00			0.00
	Application for Federal Assistance (OMB No. 4040-0004)	SF 424	40	1.0000	40.00	1.0000	40.00			0.00
	Notice of Award and Grant Agreement (approved under OMB No. 0581-0240)	AMS 33	20	1.0000	20.00	0.5833	11.67			
	AMS General Terms and Conditions (approved under OMB No. 0581-0240)	None	20	1.0000	20.00	2.0000	40.00			0.00
	Amendment Request (approved under OMB No. 0581-0240)	None	20	2.0000	40.00	1.0000	40.00			0.00
	Interim Performance Report Template (approved under OMB No. 0581-0240)	None	20	2.0000	40.00	4.0000	160.00			0.00
	SUBTOTAL		120	7	160.00	12	411.67	0.00		0.00
	TOTAL OF ALL PAGES		392	38	884.00	32	1685.66	40.00		40.00
тот	FAL - COLUMNS "F" AND "I" = OMB 831, 13 b; COLUMNS "H" AND "K" = OMB 831, 13c				924.00		1,725.66			

REPRODU	CE LOCALLY	Include form	n number and dat	te on all reprodu	ctions.		UMMARY OF I	NFORMATION C	OLLECTION					age 2 of 5
INSTRUCTION	IS: Use this fo	orm when a si	ingle informati	ion collection	document inv	olves multiple rep	oorting and	TITLE OF INFO	ORMATION COL	LECTION DO	CUMENT		OMB NO.	
recordkeeping requirements. The totals of the figures in cols. should be entered in item 13 of OM cols. (D) &/or (I) = 13a (respondent is only counted once); cols. F & I = 13b; cols. H & K = 1								Farm and F	ood Worker	Relief (FF	WR) Grant Pro	gram	0581-0331	
(K)Total/(I)Total			., .,		0 ()	Γotal/(F)Total = (C	, 0						DATE PREPA	RED
years, list as "1/6"			tically. If Col.	E's response i	s something	other than annuall	y, i.e., 1/6						Februa	ery 16, 2021
IDENTIF	FICATION OF RE	PORTING OR	RECORDKEEPIN	NG REQUIREME	NT		-			AN	NUAL BURDEN			
							-		REPORTS				RECORDS	
														TOTAL
						FORMS NO (S)	NO. OF	NO OF	TOTAL ANNUAL	HOURS	TOTAL	NO. OF	ANNUAL	RECORD-
SECTION OF		1	DESCRIPTION	ı		(If "none"	RESPONDENTS	RESPONSES	RESPONSES	PER	HOURS	RECORD-	HOURS PER	KEEPING HOURS
REGS.						so state)		PER	(Col. D x E)	RESPONSE	(Col. F x G)	KEEPERS	RECORD-	(Col. I x J)
								RESPONDENT					KEEPER	
(A)			(B)			(C)	(D)	(E)	(F)	(G)	(H)	(1)	(J)	(K)
	Request for Advance or Reimbursement (OMB No. 4040-0012)			SF 270	20	10.0000	200.00	1.0000	200.00			0.00		
	Federal I	Financial	Report (Ol	MB No. 40)40-	SF 425	20	3.0000	60.00	1.0000	60.00			0.00
	under OMB No. 0581-0240)				None	20	1.0000	20.00	4.0000	80.00			0.00	
					None						20	2.000	40.00	
				en.	BTOTAL		40	11	220.00	-	200.00	20		40.00
				SU	BIUIAL		40	11	220.00	5	280.00	20		40.00

REPRODUC	E LOCALLY. Include form	n number and da	te on all reproductions.		UMMARY OF I	NFORMATION C	OLLECTION				F	Page 3 of 5
			ion collection document inv			TITLE OF INFO	ORMATION COL	LECTION DO	CUMENT	T	OMB NO.	
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.							Food Worker	gram	0581-0331			
(K)Total/(I)Total			Total = (E)Average (H)T								DATE PREPA	RED
	mns will calculate automa '& decimal will display.	tically. If Col.	. E's response is something	other than annuall	y, i.e., 1/6						Echmin	ry 16, 2021
											Februa	Ify 16, 2021
IDENTIF	ICATION OF REPORTING OR	RECORDKEEPI	NG REQUIREMENT					AN	INUAL BURDEN	Г		
							REPORTS				RECORDS	
												TOTAL
				FORMS NO (S)	NO. OF	NO OF	TOTAL ANNUAL	HOURS	TOTAL	NO. OF	ANNUAL	RECORD-
SECTION OF		DESCRIPTION	N .	(If "none"	RESPONDENTS	RESPONSES	RESPONSES	PER	HOURS	RECORD-	HOURS PER	KEEPING HOURS
REGS.				so state)		PER	(Col. D x E)	RESPONSE	(Col. F x G)	KEEPERS	RECORD-	(Col. I x J)
						RESPONDENT					KEEPER	
(A)		(B)		(C)	(D)	(E)	(F)	(G)	(H)	(1)	(J)	(K)
7 USC 1621 & 2 CFR 200	NON-COMPETI PROGRAM: FF				0.00		0.00			0.00		
	Peer Reviewer Ap Form	plication a	and Qualification	None	24	1.0000	24.00	0.3333	8.00			0.00
	Peer Reviewer Co Confidentiality W Conflict of Interest and C Reviewers)	orksheet (Previously AMS-34 AMS	AMS 34	24	1.0000	24.00	1.0000	24.00			0.00
	Peer Reviewer AM Sheet (Previously "C and "Individual Revie	Consensus Sc	oresheet & Comments"	None	24	9.0000	216.00	2.0000	432.00			0.00
	FFWR Narrative S (which includes a template)			None	40	1.0000	40.00	10.0000	400.00			0.00
	Negotiated Indirection (NICRA)	ct Cost Rat	te Agreement	None	40	1.0000	40.00	0.2500	10.00			0.00
	Project Beneficiar	ies Questi	onnaire	None	40	1.0000	40.00	0.3333	13.33			0.00

SUMMARY OF INFORMATION COLLECTION USDA-AMS

REPRODUC	E LOCALLY. Include form number and date on all reproductions.	S	UMMARY OF I	NFORMATION C	OLLECTION				F	Page 4 of 5
	SUBTOTAL		192	14	384.00	14	887.33	0		0.00

SUMMARY OF INFORMATION COLLECTION USDA-AMS

REPRODU	CE LOCALLY	Include form	n number and dat	te on all reprodi	ctions.	9	UMMARY OF I	NFORMATION C	OLLECTION					Page 5 of 5
														1.9.
INSTRUCTIONS: Use this form when a single information collection document involves recordkeeping requirements. The totals of the figures in cols. should be entered in item 13							TITLE OF INFO	DRMATION COL	LECTION DO	CUMENT		OMB NO.		
cols. (D) &/or (I)	= 13a (respon	ndent is only o	,,		ŕ	s. H & K = 13c.								
(K)Total/(I)Total			., .,		0 ()	Cotal/(F)Total = (C	, 0						DATE PREPA	RED
NOTE: The coluyears, list as "1/6"	ımns will calc " & decimal w	ulate automa vill display.	tically. If Col.	E's response	is something (other than annuall	y, i.e., 1/6							
IDENTIF	FICATION OF RE	PORTING OR	RECORDKEEPIN	IG REQUIREME	NT					AN	INUAL BURDEN			
									REPORTS				RECORDS	
														TOTAL
						FORMS NO (S)	NO. OF	NO OF	TOTAL ANNUAL	HOURS	TOTAL	NO. OF	ANNUAL	RECORD-
SECTION OF			DESCRIPTION	1	1	(If "none"	RESPONDENTS	RESPONSES	RESPONSES	PER	HOURS	RECORD-	HOURS PER	KEEPING HOURS
REGS.						so state)		PER	(Col. D x E)	RESPONSE	(Col. F x G)	KEEPERS	RECORD-	(Col. I x J)
								RESPONDENT					KEEPER	
(A)	(B)					(C)	(D)	(E)	(F)	(G)	(H)	(1)	(J)	(K)
	Account		m and Fina	ncial Cap	ability	None	20	1.0000	20.00	0.3333	6.67			0.00
	AMS Grant Programs Worksheet along with SF 270 (Previously AMS Worksheet to Accompany each SF-270)				None	20	5.0000	100.00	1.0000	100.00			0.00	
l														
				ÇII	BTOTAL		40	6	120.00	1	106.67	Err:522		Err:522
					DIGIAL		40	0	120.00	1	100.07	111,322		1.11,022

SUMMARY OF INFORMATION COLLECTION USDA-AMS