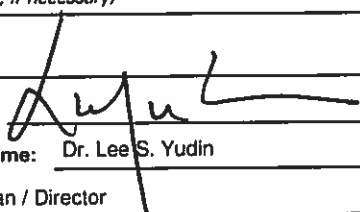


DISCLOSURE OF LOBBYING ACTIVITIES

Approved by OMB
0348-0046

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352
(See reverse for public burden disclosure.)

1. Type of Federal Action: <input checked="checked" type="checkbox"/> a. CONTRACT <input type="checkbox"/> b. GRANT <input type="checkbox"/> c. COOPERATIVE AGREEMENT <input type="checkbox"/> d. LOAN <input type="checkbox"/> e. LOAN GUARANTEE <input type="checkbox"/> f. LOAN INSURANCE	2. Status of Federal Action: <input checked="checked" type="checkbox"/> a. BID/OFFER/APPLICATION <input type="checkbox"/> b. INITIAL AWARD <input type="checkbox"/> c. POST-AWARD	3. Report Type <input checked="checked" type="checkbox"/> a. INITIAL FILING <input type="checkbox"/> b. MATERIAL CHANGE FOR MATERIAL CHANGE ONLY: YEAR _____ QUARTER _____ DATE OF LAST REPORT _____
4. Name and Address of Reporting Entity: <input checked="checked" type="checkbox"/> PRIME <input type="checkbox"/> SUBAWARDEE TIER _____, IF KNOWN: College of Natural and Applied Sciences University of Guam 303 campus Drive, Mngilao, Guam 96923 Congressional District, if known: _____		5. If Reporting Entity in No. 4 is Subawardee, Enter Name and Address of Congressional District, if known: _____
6. Federal Department/Agency USDA-APHIS		7. Federal Program Name/Description: FY2018 Farm Bill CFDA Number, if applicable: _____
8. Federal Action Number if known:		9. Award Amount if known: \$ 200,000
10a. Name and Address of Lobbying Entity <i>(If individual, last name, first name, MI)</i> na		b. Individual Performing Services <i>(including address if different from No. 10A) (last name, first name, MI)</i> na
<i>(attach Continuation sheet(s) SF LLL-A, if necessary)</i>		
11. Amount of Payment (check all that apply): \$ 0 <input checked="checked" type="checkbox"/> actual <input type="checkbox"/> planned		13. Type of Payment (check all that apply): <input type="checkbox"/> a. RETAINER <input type="checkbox"/> b. ONE-TIME FEE <input type="checkbox"/> c. COMMISSION <input type="checkbox"/> d. CONTINGENT FEE <input type="checkbox"/> e. DEFERRED <input checked="checked" type="checkbox"/> f. OTHER; SPECIFY: No payment
12. Form of Payment (check all that apply): <input type="checkbox"/> a. cash <input type="checkbox"/> b. in-kind; specify: nature _____ value _____		
14. Brief Description of Services performed or to be Performed and Date(s) of Service, including offerer(s), employee(s), or Member(s) contacted, for Payment indicated in Item 11: na <i>(attach Continuation sheet(s) SF LLL-A, if necessary)</i>		
15. Continuation Sheet(s) SF-LLL-A attached: <input type="checkbox"/> Yes <input checked="checked" type="checkbox"/> No		
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.		Signature:  Printed Name: Dr. Lee S. Yudin Title: Dean / Director Telephone No.: 671-735-2000 Date: July 2, 2018
Federal Use Only:		AUTHORIZED FOR LOCAL REPRODUCTION Standard Form - LLL