OMB Number: 4040-0004 Expiration Date: 08/31/2016

Application for Federal Assistance SF-424						
*1. Type of Submission:	*2. Type of App		lication	* If Revision, select appropriate letter(s):		
Preapplication		New				
Application	Application Continuation		on	*Other (Specify):		
Changed/Corrected Application Revision						
* 3. Date Received:			4. Ap	plicant Identifier:		
5a. Federal Entity Identifier:			*5b. Federal Award Identifier:			
State Use Only:						
6. Date Received by State: 7. State Application Identifier:						
8. APPLICANT INFORMATION:						
*a. Legal Name:University of Guam College of Natural and Applied Sciences						
*b. Employer/Taxpayer Identification Number (EIN/TIN) 98-0032933				*c. Organizational DUNS: 7799081510000		
d. Address:						
*Street 1: Agriculture and Life Sciences Building						
Street 2: 30	303 University Drive					
*City: Ma	Mangilao					
County/Parish: Gu	Guam					
*State: GL	GU: Guam					
Province:						
*Country: US	USA: United States					
*Zip / Postal Code: 96	96923					
e. Organizational Unit:						
Department Name: College of Natural and Applied Sciences				Division Name:		
f. Name and contact information of person to be contacted on matters involving this application:						
Prefix: Dr. *First Name: Aubrey						
Middle Name:						
*Last Name: Moore						
Suffix:						
Title: entomologist						
Organizational Affiliation: University f Guam						
*Telephone Number: 1-671-6	Fax Number:					
*Email: aubreymoore@guam.net						

Application for Federal Assistance SF-424				
9. Type of Applicant 1: Select Applicant Type: H: Public/State Controlled Institution of Higher Learning				
Type of Applicant 2: Select Applicant Type:				
Type of Applicant 3: Select Applicant Type:				
*Other (Specify)				
*10 Name of Federal Agency:				
USDA Forest Service				
11. Catalog of Federal Domestic Assistance Number:				
98-0032933				
CFDA Title:				
Forest Health Protection				
*12 Funding Opportunity Number:				
*Title:				
Improving Coconut Rhinoceros Beetle Breeding Site Detection Using Harmonic Radar				
13. Competition Identification Number:				
Title:				
14. Areas Affected by Project (Cities, Counties, States, etc.):				
Guam				
*15. Descriptive Title of Applicant's Project:				
Improving Coconut Rhinoceros Beetle Breeding Site Detection Using Harmonic Radar				
Attach supporting documents as specified in agency instructions.				

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Application for Federal Assistance SF-424					
16. Congressional Districts Of:					
*a. Applicant:		*b. Program/Project:			
Attach an additional list of Program/Project Congressional Districts if needed.					
17. Proposed Project:					
*a. Start Date: June 1, 2020		*b. End Date: May 30, 2021			
18. Estimated Funding (\$):					
*a. Federal	\$23,000				
*b. Applicant	\$				
*c. State	\$				
*d. Local	\$				
*e. Other	\$				
*f. Program Income	\$				
*g. TOTAL	\$23,000				
*19. Is Application Subject to Review By State Under Executive Order 12372 Process? a. This application was made available to the State under the Executive Order 12372 Process for review on b. Program is subject to E.O. 12372 but has not been selected by the State for review. c. Program is not covered by E.O. 12372. *20. Is the Applicant Delinquent On Any Federal Debt? (If "Yes," provide explanation in attachment.) Yes No If "Yes", provide explanation and attach. 21. *By signing this application, I certify (1) to the statements contained in the list of certifications** and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances** and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties. (U. S. Code, Title 218, Section 1001) ** I AGREE					
** The list of certifications and assurances, or an internet site where you may obtain this list, is contained in the announcement or agency specific instructions.					
Authorized Representative:					
Prefix: Dr *First Name: Lee Middle Name: Stanton *Last Name: Yudin Suffix: Suffix: *Last Name: Na					
*Title: Dean / Director					
*Telephone Number: 1-67	1-735-2000	Fax Number: 1-671-734-4600			
* Email: lyudin@triton.uog.edu					
*Signature of Authorized R	epresentative:	*Date Signed:			

SF-424 for Harmonic Radar grant proposal

Final Audit Report 2020-05-07

Created: 2020-05-06

By: Aubrey Moore (aubreymoore2013@gmail.com)

Status: Signed

Transaction ID: CBJCHBCAABAAaM2qQuvi52kE5Pc2VI_qSMuP6Dg4c0T2

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