	bublic burden disclos aral Action: d/offer/application tial award st-award	3. Report Type: a. initial filing b. material change For Material Change Only: year quarter date of last report
4. Name and Address of Reporting Entity:	5. If Reporting B and Address	Entity in No. 4 is a Subawardee, Enter Name of Prime:
Congressional District, <i>if known</i> : <sup>4c</sup> 6. Federal Department/Agency:	Congressional District, <i>if known</i> : Delaware 7. Federal Program Name/Description:	
8. Federal Action Number, if known:	9. Award Amou \$ 286,927	,159
8. Federal Action Number, if known : 10. a. Name and Address of Lobbying Registrant ( if individual, last name, first name, MI): N/A	9. Award Amou \$ 286,927 b. Individuals P different from	nt, if known: ,159 erforming Services (including address if
10. a. Name and Address of Lobbying Registrant ( if individual, last name, first name, MI):	9. Award Amou \$ 286,927 b. Individuals P different from (last name, fi N/A Signature: Print Name: (b) (b) (6)	nt, if known: ,159 Performing Services (including address if n No. 10a) rst name. MI): (6)