

USDSBC Industry Contribution Form

Date: _____

Name: _____ USDBC Member Organization or Company: _____

	Activity name or description during which you represented NDBC	Date(s) of Activity	Number of hours (use decimals for fractions of an hour -- i.e. 1 1/2 hr = 1.5)	Hourly rate: Using GS 15, Step 10 rate of \$62.06per hour	Lodging & Meals (Actual Cost)	Transportation Costs (Mileage @ \$0.50/mile), Communication Costs, and Misc. Incidentals	Total Contribution Equivalent
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
	Total Member Contribution*						

Signature: _____

*The time that you spend on USDBC-related business contributes greatly toward the Council's mandatory matching funds requirement for the MAP, FMD, EMP, QSP, and Section 108 funds that we receive from USDA/FAS. Thank you for your time in both representing the Council and in completing this form.