OMB Number: 2030-0020
Expiration Date: 04/30/2021

EPA KEY CONTACTS FORM

Authorized Representative: *Original awards and amendments will be sent to this individual for review and acceptance, unless otherwise indicated.*

Name: Prefix: Mr. First Name: Scott Middle Name: E.
Last Name: Enright Suffix:

Title: Chairperson, Board of Agriculture

Complete Address:

Street1: 1428 S. King Street
Street2:
City: Honolulu State: Hawaii
Zip / Postal Code: 96818-2512 Country: USA

Phone Number: (808) 973-9550 **Fax Number:** (808) 973-9613

E-mail Address:

Payee: *Individual authorized to accept payments.*

Name: Prefix: Mr. First Name: Keith Middle Name: L.
Last Name: Aragaki Suffix:

Title: Administrative Services Officer

Complete Address:

Street1: 1428 S. King Street
Street2:
City: Honolulu State: Hawaii
Zip / Postal Code: 96814-2512 Country: USA

Phone Number: (808) 973-9606 **Fax Number:** (808) 973-9613

E-mail Address: Keith.L.Aragaki@hawaii.gov

Administrative Contact: *Individual from Sponsored Programs Office to contact concerning administrative matters (i.e., indirect cost rate computation, rebudgeting requests etc).*

Name: Prefix: Mr. First Name: Jose Middle Name:
Last Name: Balignasay Suffix:

Title: Program Compliance Officer

Complete Address:

Street1: 1428 S. King Street
Street2:
City: Honolulu State: Hawaii
Zip / Postal Code: 96814-2512 Country: USA

Phone Number: (808) 973-9413 **Fax Number:** (808) 973-9418

E-mail Address: Jose.T.Balignasay@hawaii.gov

EPA KEY CONTACTS FORM

Project Manager: *Individual responsible for the technical completion of the proposed work.*

Name: **Prefix:** Dr. **First Name:** John **Middle Name:** J.

Last Name: McHugh **Suffix:** Jr.

Title: Pesticides Branch Program Manager

Complete Address:

Street1: 1428 S. King Street

Street2:

City: Honolulu **State:** Hawaii

Zip / Postal Code: 96814-2512 **Country:** USA

Phone Number: (808) 973-9404 **Fax Number:** (808) 973-9418

E-mail Address: John.McHugh@hawaii.gov

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