

PAPERWORK REDUCTION ACT CHANGE WORKSHEET

Agency/subagency		OMB Control Number <div style="text-align: center; margin-top: 10px;"> <div style="display: inline-block; width: 80px; height: 20px; background-color: #d9e1f2; border: 1px solid black;"></div> - <div style="display: inline-block; width: 80px; height: 20px; background-color: #d9e1f2; border: 1px solid black;"></div> </div>			
<i>Enter only items that change</i> <div style="display: flex; justify-content: space-between;"> Current record New record </div>					
Agency form number (s)					
Annual reporting and recordkeeping hour burden					
Number of respondents					
Total annual responses					
Percent of these responses collected electronically	%		%		
Total annual hours					
Difference					
Explanation of difference					
Program change Adjustment					
Annual reporting and recordkeeping cost burden (in thousands of dollars)					
Total annualized Capital/Startup costs					
Total annual costs (O&M)					
Total annualized cost requested					
Difference					
Explanation of difference					
Program change Adjustment					
Other changes					
Signature of Senior Official or designee:		Date:		For OIRA Use	

** This form cannot be used to extend an expiration date.