PAPERWORK REDUCTION ACT SUBMISSION

Please read the instructions before completing this form. For additional forms or assistance in completing this form, contact your agency's Paperwork Clearance Officer. Send two copies of this form, the collection instrument to be reviewed, the Supporting Statement, and any additional documentation to: Office of Information and Regulatory Affairs, Office of Management and Budget, Docket Library, Room 10102, 725 17th Street NW, Washington, DC 20503.

	areas and greater as								
AGENCY/SUBAGENCY ORIGINATING REQUEST DOD Office of the Assistant Secretary of Defense (Health Affairs) Clinical & Program Policy-Skyline 5, Suite 601 5111 Leesburg Pike, Falls Church, VA 2204		a. 0720 _ 0029 b. NONE							
3. TYPE OF INFORMATION COLLECTION (X one) (For b f., note Item A2 of Supporting Statement instructions)		4. TYPE OF REVIEW REQUESTED (X one) X a. REGULAR SUBMISSION							
a. NEW COLLECTION		We have a second control of the second contr							
b. REVISION OF A CURRENTLY APPROVED COLLECTION		b. EMERGENCY - APPROVAL REQUESTED BY:// c. DELEGATED							
x 6. EXTENSION OF A CURRENTLY APPROVED COLLECTION									
A SOLICION OF A COMMENTAL APPROVED COLLECTION		5. SMALL ENTITIES							
d. REINSTATEMENT, WITHOUT CHANGE, OF A PREVIOUSLY APPROVED COLLECTION FOR WHICH APPROVAL HAS EXPIRED e. REINSTATEMENT, WITH CHANGE, OF A PREVIOUSLY APPROVED COLLECTION FOR WHICH APPROVAL HAS EXPIRED f. EXISTING COLLECTION IN USE WITHOUT AN OMB CONTROL		Will this information collection have a significant economic impact on a substantial number of small entities? YES X NO 6. REQUESTED EXPIRATION DATE X a. THREE YEARS FROM APPROVAL DATE							
					NUMBER 7. TITLE		b. OTHER:		
					Prospective Studies of US Military Forces: The Mill 8. AGENCY FORM NUMBER(S) (// applicable)	ennium Conoi	t Study	_	
					None 9. KEYWORDS				
9. KEYWONDS									
Health, Health Statistics									
military personnel during and after separation from service first war with Iraq in 1990-1991 and has as one of its object syndromes. The study was recommended by the Institute of Authorization Act and funded in the FY2001 Defense App	e. The investiga ctives the advan of Medicine in 1 propriations Act		e						
11. AFFECTED PUBLIC (Mark primary with "P" and all others	15.5	X*) 12. OBLIGATION TO RESPOND (X one)	12. OBLIGATION TO RESPOND (X one)						
P a. INDIVIDUALS OR HOUSEHOLDS d. FARM	57.0	* a. VOLUNTARY							
	RAL GOVERNMEN		b. REQUIRED TO OBTAIN OR RETAIN BENEFITS						
		AL GOVERNMENT c. MANDATORY							
13. ANNUAL REPORTING AND RECORDKEEPING HOUR		14. ANNUALIZED COST TO RESPONDENTS (In thousands of dollar	Make Service						
a. NUMBER OF RESPONDENTS	34,104	TOTAL CAPITAL/STARTUP COSTS \$0.00							
b. TOTAL ANNUAL RESPONSES 34,104		b. TOTAL ANNUAL COSTS (O&M) 0.0							
(1) Percentage of these responses collected electronically 65.00 %		c. TOTAL ANNUALIZED COST REQUESTED 0.00							
c. TOTAL ANNUAL HOURS REQUESTED	25,578	d. CURRENT OMB INVENTORY 0.00							
d. CURRENT OMB INVENTORY	14,400	e. DIFFERENCE (+, -) 0.00							
e. DIFFERENCE (+, -) f. EXPLANATION OF (1) Program change (+, -)	+11178	I. EXPLANATION OF DIFFERENCE:							
f. EXPLANATION OF (1) Program change (+, -) DIFFERENCE: (2) Adustment (+, -)	0	(1) Program change (+, -) 0.00							
	+11178		.00						
15. PURPOSE OF INFORMATION COLLECTION (Mark print "P" and all others that apply with "X")	mary with	16. FREQUENCY OF RECORDKEEPING OR REPORTING (X all that ap) a. RECORDKEEPING b. THIRD PARTY DISCLOSURE	ply/						
e. APPLICATION FOR BENEFITS X e. PROGRAM PLANNING		X c. REPORTING:							
b. PROGRAM EVALUATION ON MA	NAGEMENT	X (1) On Occasion (2) Weekly (3) Mon	thily						
c. GENERAL PURPOSE STATISTICS P t. RESEAU		(4) Quarterly (5) Semi-Annually (6) Annu	rally						
	ATORY OR JANCE	(7) Biennielly (8) Other (Describe)	-						
17. STATISTICAL METHODS Does this information collection employ	18. AGENCY CO submission)	NTACT (Person who can best answer questions regarding the content of	this						
statistical methods?	a. NAME (Last,)	First, Middle (nitivit) b. TELEPHONE NUMBER (Include							
x yes No R	Ruscio, Bruce Lt Col USAF, BSC area code/ (703) 681-1703								

OMB CONTROL NUMBER 0720 - 0029	Prospective Studies of US Military Forces: The Millennium	n Cobort Study
19. CERTIFICATION FOR	PAPERWORK REDUCTION ACT SUBMISSIONS	
	TIFICATION (Internal DoD Use Only)	- Factor
(1) Signature MC	Rugarer Ryan	(a) Date (a - 8 - 240 6
On behalf of this Fed complies with 5 CFR	eral agency, I certify that the collection of information en	compassed by this request
NOTE: The text of 5 instructions. The cer instructions.	CFR 1320.9, and the related provisions of 5 CFR 1320.1 tification is to be made with reference to those regulator	8(b)(3), appear at the end of the y provisions as set forth in the
The following is a sur certification covers:	mmary of the topics, regarding the proposed collection of	f information, that the
(a) It is necessary for	the proper performance of agency functions;	
(b) It avoids unnecess	sary duplication;	
(c) It reduces burden	on small entities;	
(d) It uses plain, cohe	erent, and unambiguous language that is understandable t	to respondents;
	will be consistent and compatible with current reporting	
	ention periods for recordkeeping requirements;	
	lents of the information called for under 5 CFR 1320.8(b))(3) about:
	mation is being collected;	
(ii) Use of informa	RI S 18915	
(iii) Burden estima		
	ane i	
	conse (voluntary, required for a benefit, or mandatory);	
	tent of confidentiality; and	
	ry currently valid OMB control number;	
(h) it was developed to management and	by an office that has planned and allocated resources for use of the information to be collected (see note in Itam 1	the efficient and effective 19 of the instructions);
(i) If applicable, it use	es effective and efficient statistical survey methodology;	and
(j) It makes appropria	te use of information technology.	
If you are unable to co reason in item 18 of t	ertify compliance with any of these provisions, identify the Supporting Statement.	he item below and explain the