INSTRUCTORS UGE-UNS ALLY when the fingue with the financial terms and the content involves multiple reporting and recordkeeping requirements. The totals of the figures in cols. should be entered in item 13 of OMB-83-1: cols. (D) &/or (I) = 13a (respondent is only counted once); cols. F & I = 13b; cols. H & K = 13c.

LOW PATHOGENIC AVIAN INFLUENZA; PAYMENT OF INDEMNITY

омв **No**Page 1 of 3

0579-0305

DATE PREPARED

(F)Total/(D)Total = (E)Average (H)Total/(F)Total = (G)Average

(K)Total/(I)Total = (J)Average

NOTE: The columns will calculate automatically. If Col. E's response is something other than annually, i.e., 1/6 years, list as "1/6" & decimal will display.

December 4, 2007

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-									Decem	iber 4, 2007	
IDENTIF	FICATION OF REPORTING OR RECORDKEEPING REQUIREMENT						•				
			REPORTS						RECORDS		
SECTION OF REGS.	DESCRIPTION	FORMS NO (S) (If "none" so state)	NO. OF RESPONDENTS	NO OF RESPONSES PER	TOTAL ANNUAL RESPONSES (Col. D x E)	HOURS PER RESPONSE	TOTAL HOURS (Col. F x G)	NO. OF RECORD- KEEPERS	ANNUAL HOURS PER RECORD-	TOTAL RECORD- KEEPING HOURS (Col. I x J)	
(4)	(D)	(6)	(D)	RESPONDENT	(5)	(C)	415	(1)	KEEPER	(14)	
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(1)	(J)	(K)	
146.13	LABS (SIGNATURE ONLY)										
	SUMMARY OF BREEDING FLOCK PARTICIPATION -BUSINESS	VS 9-4	29	7.0000	203.00	4.0000	812.00				
	STATE		19	7.0000	133.00	4.0000	532.00				
	REPORT OF HATCHERIES, DEALERS, AND INDEPENDENT FLOCKS PARTICIPATING IN NPIP - BUSINESS	VS 9-5	29	2.0000	58.00	0.5000	29.00				
	STATE		19	2.0000	38.00	0.5000	19.00				
56.4, 56.6, 56.7	ALL SPECIES APPRAISAL & INDEMNITY APPLICATION (SIGNATURE ONLY)										
	SUBTOTAL				432.00		1,392.00	0.00		0.00	
	TOTAL OF ALL PAGES				91,434.00		8,948.00	2,300.00		46,000.00	
TOTAL - COLUMNS "F" AND "I" = OMB 831, 13 b; COLUMNS "H" AND "K" = OMB 831, 13c			2,318		93,734.00		54,948.00				

INSTRUCTIONS: Use this form when a single information collection document involves multiple reporting and recordkeeping requirements. The totals of the figures in cols. should be entered in item 13 of OMB-83-1: cols. (D) &/or (I) = 13a (respondent is only counted once); cols. F & I = 13b; cols. H & K = 13c.

(F)Total/(D)Total = (E)Average (H)Total/(F)Total = (G)Average

(K)Total/(I)Total = (J)Average

NOTE: The columns will calculate automatically. If Col. E's response is something other than annually, i.e., 1/6 years, list as "1/6" & decimal will display.

TITLE OF INFORMATION COLLECTION DOCUMENT

LOW PATHOGENIC AVIAN INFLUENZA; PAYMENT OF INDEMNITY

омв но. 0579-0305

DATE PREPARED

December 4, 2007

IDENTIFIC	IDENTIFICATION OF REPORTING OR RECORDKEEPING REQUIREMENT			ANNUAL BURDEN							
			REPORTS					RECORDS			
		FORMS NO (S)	NO. OF	NO OF	TOTAL ANNUAL	HOURS	TOTAL	NO. OF	ANNUAL	TOTAL RECORD-	
SECTION OF REGS.	DESCRIPTION	(If "none"	RESPONDENTS	RESPONSES PER	RESPONSES	PER	HOURS	RECORD- KEEPERS	HOURS PER RECORD-	KEEPING HOURS	
REGS.		so state)		RESPONDENT	(Col. D x E)	RESPONSE	(Col. F x G)	KEEPERS	KEEPER	(Col. I x J)	
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)	
	INDEMNITY WORKSHEET - BUSINESS	VS 1-23, 1- 23A	1	1.0000	1.00	0.5000	1.00				
	STATE		1	1.0000	1.00	0.5000	1.00				
	MOU (SIGNATURE ONLY)										
146.4, 146.11	RECORDKEEPING - BUSINESS							1,380	20.000	27,600.00	
	STATE							920	20.000	18,400.00	
146.14	FLOCK SELECTING AND TESTING REPORT MOST TYPE CHICKEN SLAUGHTER PLANTS - BUSINESS	VS 9-2	102	520.0000	53,040.00	0.0830	4,402.00				
	SUBTOTAL				53,042.00		4,404.00	2,300		46,000.00	

INSTRUCTIONS: Use this form when a single information collection document involves multiple reporting and

TITLE OF INFORMATION COLLECTION DOCUMENT

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recordkee REPROPOSE THE York of the Highest and the resolution only counted once); cols. F & I = 13b; cols. H & K = 13c. | LOW PATHOGENIC AVIA

LOW PATHOGENIC AVIAN INFLUENZA; PAYMENT OF INDEMNITY

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(F)Total/(D)Total = (E)Average (H)Total/(F)Total = (G)Average

(K)Total/(I)Total = (J)Average

NOTE: The columns will calculate automatically. If Col. E's response is something other than annually, i.e., 1/6

years, list as "1/6" & decimal will display.

DATE PREPARED

IDENTIFICATION OF REPORTING OR RECORDKEEPING REQUIREMENT ANNUAL BURDEN

IDENTIF	FICATION OF REPORTING OR RECORDKEEPING REQUIREMENT	_	ANNUAL BURDEN								
			REPORTS					RECORDS			
										TOTAL	
		FORMS NO (S)	NO. OF	NO OF	TOTAL ANNUAL	HOURS	TOTAL	NO. OF	ANNUAL	RECORD-	
SECTION OF	DESCRIPTION	(If "none"	RESPONDENTS	RESPONSES	RESPONSES	PER	HOURS	RECORD-	HOURS PER	KEEPING HOURS	
REGS.		so state)		PER	(Col. D x E)	RESPONSE	(Col. F x G)	KEEPERS	RECORD-	(Col. I x J)	
				RESPONDENT					KEEPER		
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(1)	(J)	(K)	
	STATE		68	520.0000	35,360.00	0.0830	2,935.00				
146.44	TURKEY SLAUGHTER PLANTS - BUSINESS	VS 9-2	30	12.0000	360.00	0.0830	30.00				
	STATE		20	12.0000	240.00	0.0830	20.00				
	TABLE EGG PRODUCERS - BUSINESS	VS 9-2	1,200	1.0000	1,200.00	0.0830	100.00				
	STATE		800	1.0000	800.00	0.0830	67.00			0.00	
					0.00		0.00			0.00	
	SUBTOTAL				37,960.00		3,152.00	0		0.00	