INSTRUCTIONS: Use this form when a single information collection document involves multiple public reporting and recordkeeping requirements. The totals of the figures in cols. (d), (F), (H), (I) and (K) should be entered in item 13 of OMB 83-1. For cols. (E), (G), & (J), the averages of the totals shall be computed, as follows, and then entered on the OMB 83-1.

(F) Total / (D) Total = (E) (H) Total / (F) Total = (G) (K) Total / (I) Total = (J) Average

TITLE OF INFORMATION COLLECTION DOCUMENT

Self Certification Medical Statement

OMB NO. 0579- 0196

DATE PREPARED

10/15/2007

IDENTIFICATION OF REPORTING OR RECORDKEEPING REQUIREMENT

ANNUAL BURDEN

SECTION OF REGULATIONS (A)	DESCRIPTION (B)	FORM NO(S). (If "none", so state) (C)	REPORTS: NO. OF RESPON-DENTS (D)	REPORTS: NO. OF RESPONSE PER RESPON-DENT (E)	REPORTS: TOTAL ANNUAL RESPONSES (Col. D x E) (F)	REPORTS: HOURS PER RESPONSE (G)	REPORTS: TOTAL HOURS (Col. F x G) (H)	RECORDS: NO. OF RECORD KEEPERS (I)	RECORDS: ANNUAL HOURS PER RECORD-KEEPER (J)	RECORDS: TOTAL RECORD-KEEPING HOURS (Col. I x J) (K)
5 CFR 339	Medical Qualification Form	MRP-5	600	1	600	0.167	100			
			600		600		100			

APHIS FORM 71 (JAN 96) *(Previous editions are obsolete.)*

SUMMARY OF INFORMATION COLLECTIONS *(Public Burden)*

USDA - APHIS