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

CWD IN CERVIDS; PAYMENT OF INDEMNITY

омв но. 0579-0189

DATE PREPARED

October 10, 2007

IDENTIFICATION OF REPORTING OR RECORDKEEPING REQUIREMENT			ANNUAL BURDEN								
			REPORTS						RECORDS		
SECTION OF REGS.	DESCRIPTION	FORMS NO (S) (If "none" so state)	NO. OF RESPONDENTS	NO OF RESPONSES PER RESPONDENT	TOTAL ANNUAL RESPONSES (Col. D x E)	HOURS PER RESPONSE	TOTAL HOURS (Col. F x G)	NO. OF RECORD- KEEPERS	ANNUAL HOURS PER RECORD- KEEPER	TOTAL RECORD- KEEPING HOURS (Col. I x J)	
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(1)	(J)	(K)	
55.3, 55.4, 55.5, 55.6, 55.7	APPRAISAL AND INDEMNITY CLAIM FORM	VS 1-23	10	1.0000	10.00	1.0000	10.00			0.00	
55.7	HERD PLAN AGREEMENT (SIGNATURE ONLY)				0.00		0.00			0.00	
					0.00		0.00			0.00	
					0.00		0.00			0.00	
					0.00		0.00			0.00	
					0.00		0.00			0.00	
	SUBTOTAL				10.00		10.00	0.00		0.00	
	TOTAL OF ALL PAGES				10.00		10.00	0.00		0.00	

REPRODUCE LOCALLY. Include form number and date on all reproductions.	SUMMARY	OF INFORMATION COLLECTION		Page 2 of 2
TOTAL - COLUMNS "F" AND "I" = OMB 831, 13 b; COLUMNS "H" AND "K" = OMB 831, 13c	1 10	10.00	10.00	

SUMMARY OF INFORMATION COLLECTION USDA-APHIS