

**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**  
 TUBERCULOSIS

**OMB NO.**  
 0579-0146

**DATE PREPARED**  
 September 28, 2009

IDENTIFICATION OF REPORTING OR RECORDKEEPING REQUIREMENT			ANNUAL BURDEN							
SECTION OF REGS. (A)	DESCRIPTION (B)	FORMS NO (S) (If "none" so state) (C)	REPORTS					RECORDS		
			NO. OF RESPONDENTS (D)	NO OF RESPONSES PER RESPONDENT (E)	TOTAL ANNUAL RESPONSES (Col. D x E) (F)	HOURS PER RESPONSE (G)	TOTAL HOURS (Col. F x G) (H)	NO. OF RECORD-KEEPERS (I)	ANNUAL HOURS PER RECORD-KEEPER (J)	TOTAL RECORD-KEEPING HOURS (Col. I x J) (K)
77.9(d), 77.7(e), 77.11(d)	TB Management Plan (State)		4	1	4.00	300.0000	1,200.00			0.00
77.4(a)	Request for Zone status (State)		4	1	4.00	300.0000	1,200.00			0.00
77.4(a)(2)	Epidemiological review of zone testing (State)		4	12	48.00	5.0000	240.00			0.00
77.7(e), 77.9(e), 77.11(e)	Annual Report to Qualify for Renewal of Status (State)	VS 6-38	25	1	25.00	10.0000	250.00			0.00
77.10©(d),, 77.12(b)©(d)	Certificate of Movement (State)		4	250	1,000.00	0.1670	167.00			0.00
	Business		2,560	2	5,120.00	0.1670	855.04			0.00
	<b>SUBTOTAL</b>				6,201.00		3,912.04	0.00		0.00
	<b>TOTAL OF ALL PAGES</b>				7,285.00		4,647.04	8.00		160.00

<b>TOTAL - COLUMNS "F" AND "I" = OMB 831, 13 b; COLUMNS "H" AND "K" = OMB 831, 13c</b>				<b>7,293.00</b>		<b>4,807.00</b>			
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77.4(b)	Retention of Movement Certificate (State)				0.00			0.00	4	20.000	80.00
77.4(3)	Memorandum of Understanding (State)		4	1	4.00	100.0000	400.00	4	20.000	80.00	
77.7(b)	Certificate of Tuberculin Test (State)	VS 6-22C, VS 6-22D	180	11	1,080.00	0.1690	335.00				
<b>SUBTOTAL</b>					1,084.00		735.00	8		160.00	