

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
 Community Outreach and Assistance Partnership Program

OMB NO.
 0563-0066

DATE PREPARED
 November 5, 2010

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)	
	Narrative Title Page	None	120	1.00	120.00	0.3300	39.60			0.00	
	Narrative	None	120	1.00	120.00	2.1600	259.20			0.00	
	Delivery Plan	None	120	1.00	120.00	2.1600	259.20			0.00	
	Statement of Work	None	120	1.00	120.00	4.0000	480.00			0.00	
	Budget Narrative	None	120	1.00	120.00	1.0000	120.00			0.00	
	Certification Regarding Debarment, Suspension, and other Responsibility Matters - Primary Covered Transactions	AD-1047	120	1.00	120.00	0.1600	19.20				
	Certification Regarding Drug-Free Workplace Requirements (Grants)	AD-1049	120	1.00	120.00	0.1600	19.20				
	Disclosure of Lobbying Activities (form approved under 0348-0046)	SF-LLL	120	1.00	120.00	0.1600	19.20				
	SUBTOTAL				960.00		1,215.60	0.00		0.00	
	TOTAL OF ALL PAGES				960.00		1,215.60	0.00		0.00	
	TOTAL - COLUMNS "F" AND "I" = OMB 831, 13 b; COLUMNS "H" AND "K" = OMB 831, 13c				960.00		1,215.60				

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 (F)Total/(D)Total = (E)Average (H)Total/(F)Total = (G)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
 Community Outreach and Assistance Partnership Program

OMB NO.
 0583-0066

DATE PREPARED
 November 5, 2010

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)
			(D)	(E)	(F)	(G)	(H)	(I)	(J)	(K)
	Forms & burden approved under other OMB numbers				0.00			0.00		0.00
	Application for Federal Assistance (4040-0004)	SF 424	120	1.0000	120.00	1.5000	180.00			0.00
	Budget Information Non-Construction Programs (4040-0006)	SF 424A	120	1.0000	120.00	6.0000	720.00			0.00
	Assurances Non-Construction Programs (4040-0007)	SF 424B	120	1.0000	120.00	0.2500	30.00			0.00
					0.00		0.00			0.00
					0.00		0.00			0.00
	SUBTOTAL				360.00		930.00	0		0.00