

# PAPERWORK REDUCTION ACT CHANGE WORKSHEET

|  |   |
|--|---|
| Agency/Subagency<br><br>Board of Governors of the Federal Reserve System | OMB control number<br><br>7 1 0 0 - 0 _ _ _ _ |
|--|---|

*Enter only items that change*

**Current Record**

**New Record**

|  |       |                                |
|--|-------|--------------------------------|
| Agency form number(s)  |       |                                |
| <b>Annual reporting and recordkeeping hour burden</b><br><br>Number of respondents<br><br>Total annual responses<br>Percent of these responses collected electronically<br><br>Total annual hours<br><br>Difference<br>Explanation of difference:     Program change<br><span style="margin-left: 150px;">Adjustment</span>    |       |                                |
|  |       |                                |
|  |       |                                |
|  |       |                                |
|  | %     | %                              |
|  |       |                                |
|  |       |                                |
|  |       |                                |
| <b>Annual reporting and recordkeeping cost burden (in thousands of dollars)</b><br><br>Total annualized Capital/Startup costs<br><br>Total annual costs (O&M)<br><br>Total annualized cost requested<br><br>Difference<br>Explanation of difference:     Program change<br><span style="margin-left: 150px;">Adjustment</span> |       |                                |
|  |       |                                |
|  |       |                                |
|  |       |                                |
|  |       |                                |
|  |       |                                |
|  |       |                                |
|  |       |                                |
| Other Change**   |       |                                |
| Signature of Senior Official or designee:  | Date: | For OIRA Use<br>_____<br>_____ |

\*\* This form cannot be used to extend an expiration date.