




DEPARTMENT OF THE TREASURY  
BUREAU OF THE FISCAL SERVICE  
WASHINGTON, DC 20227

DATE: **MAR 10 2014**

TO: J. Wesley Powe, Manager  
Records and Information Management Branch

FROM: John B. Hill  
Assistant Commissioner  
Payment Management 

SUBJECT: OMB Fast Track Clearance of the  
Go Direct Financial Institution and Corporation Website Survey  
FMS Tracking No. 1510-0076

Attached is documentation for the Office of Management and Budget (OMB) review of the Go Direct Financial Institution and Corporation Website Survey using the Fast Track Clearance process. This survey is designed to get feedback from customers using the Go Direct website to enroll benefit recipients in direct deposit. We will survey 500 respondents for 2 minutes which is 17 hours of burden imposed on the Financial Institutions and Corporations.

If you have any questions regarding this study, please direct them to Walt Henderson on 874-6624.

Attachments: OMB Request for Generic Clearance of Go Direct  
Financial Institution and Corporation Website Survey  
83-C - Paperwork Reduction Act Change Worksheet  
Go Direct Financial Institution and Corporation Website Survey

## PAPERWORK REDUCTION ACT CHANGE WORKSHEET

|   |   |                                       |                                    |
|---|---|---------------------------------------|------------------------------------|
| Agency/subagency<br><br>Department of the Treasury - Bureau of the Fiscal Service   |   | OMB Control Number<br><br>1510 - 0076 |                                    |
| <i>Enter only items that change</i>   |   |                                       |                                    |
|   |   | Current record                        | New record                         |
| Agency form number (s)<br>Go Direct FI and Corporation<br>Website Survey  |   |                                       |                                    |
| Annual reporting and recordkeeping hour burden  |   |                                       |                                    |
| Number of respondents   |   | 500                                   |                                    |
| Total annual responses  |   | 500                                   |                                    |
| Percent of these responses collected electronically   | % | 100                                   | %                                  |
| Total annual hours  |   | 17                                    |                                    |
| Difference  |   |                                       |                                    |
| Explanation of difference   |   |                                       |                                    |
| Program change Adjustment   |   |                                       |                                    |
| Annual reporting and recordkeeping cost burden (in thousands of dollars)  |   |                                       |                                    |
| Total annualized Capital/Startup costs  |   | 0                                     |                                    |
| Total annual costs (O&M)  |   | 0                                     |                                    |
| Total annualized cost requested   |   | 0                                     |                                    |
| Difference  |   | 0                                     |                                    |
| Explanation of difference   |   |                                       |                                    |
| Program change Adjustment   |   |                                       |                                    |
| Other changes**<br>Receive feedback from Go Direct users to aid in development of website redesign.                       |   |                                       |                                    |
| Signature of Senior Official or designee:<br><br><i>Walt Henderson</i><br>Walt Henderson, Director, EFT Strategy Division |   | Date:<br><br>3/6/14                   | For OIRA Use<br><br>_____<br>_____ |

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

**Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback” (OMB Control Number: ~~1510-0076~~)**

**TITLE OF INFORMATION COLLECTION:** Go Direct Financial Institution and Corporate Website Feedback

**PURPOSE:** Receive feedback from users to aid in development of website redesign.

**DESCRIPTION OF RESPONDENTS:** Financial Institutions (Banks, Credit Unions, etc.) and Corporations (Nursing Homes, etc.) who use the current website to enroll federal benefit recipients into direct deposit. This website helps the Treasury in their cost reduction efforts by reducing the number of paper checks that are printed and mailed.

**TYPE OF COLLECTION:** (Check one)

- |   |   |
|---|---|
| <input type="checkbox"/> Customer Comment Card/Complaint Form                     | <input type="checkbox"/> Customer Satisfaction Survey |
| <input checked="" type="checkbox"/> Usability Testing (e.g., Website or Software) | <input type="checkbox"/> Small Discussion Group       |
| <input type="checkbox"/> Focus Group  | <input type="checkbox"/> Other: _____                 |

**CERTIFICATION:**

I certify the following to be true:

1. The collection is voluntary.
2. The collection is low-burden for respondents and low-cost for the Federal Government.
3. The collection is non-controversial and does not raise issues of concern to other federal agencies.
4. The results are not intended to be disseminated to the public.
5. Information gathered will not be used for the purpose of substantially informing influential policy decisions.
6. The collection is targeted to the solicitation of opinions from respondents who have experience with the program or may have experience with the program in the future.

Name: Walt Henderson, Director, EFT Strategy Division

To assist review, please provide answers to the following question:



**Personally Identifiable Information:**

- 1. Is personally identifiable information (PII) collected?  Yes  No
- 2. If Yes, is the information that will be collected included in records that are subject to the Privacy Act of 1974?  Yes  No
- 3. If Applicable, has a System or Records Notice been published?  Yes  No

**Gifts or Payments:**

Is an incentive (e.g., money or reimbursement of expenses, token of appreciation) provided to participants?  Yes  No

**BURDEN HOURS**

| Category of Respondent                               | No. of Respondents  | Participation Time   | Burden          |
|--|---------------------|----------------------|-----------------|
| Respond to questionnaire via link on current website | 500 estimate        | 2 minutes each       |                 |
| <b>Totals</b>  | <b>500 estimate</b> | <b>1,000 minutes</b> | <b>17 Hours</b> |

**FEDERAL COST:** The estimated annual cost to the Federal government is \$0

**If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:**

**The selection of your targeted respondents**

- 1. Do you have a customer list or something similar that defines the universe of potential respondents and do you have a sampling plan for selecting from this universe?  
 Yes  No

If the answer is yes, please provide a description of both below (or attach the sampling plan)? If the answer is no, please provide a description of how you plan to identify your potential group of respondents and how you will select them? There are 17,857 email addresses in the database beginning from 1/28/13 to 1/29/14. Of these, there are 1,217 that have been active within the past 90 days. Our plan is to send an email to the 1,217 group informing them that a link to the survey is on the website in case they are interested in providing feedback to help us improve the website.

Attached are the questions that will be asked, including a link to the survey.

<https://www.frbatlanta.org/survey/surveyDoc.cfm?sid=6498461>

**Administration of the Instrument**

1. How will you collect the information? (Check all that apply)
  - Web-based or other forms of Social Media
  - Telephone
  - In-person
  - Mail
  - Other, Explain
2. Will interviewers or facilitators be used?  Yes  No

**Please make sure that all instruments, instructions, and scripts are submitted with the request.**

**Instructions for completing Request for Approval under the “Generic Clearance for the Collection of Routine Customer Feedback”**

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**TITLE OF INFORMATION COLLECTION:** Provide the name of the collection that is the subject of the request. (e.g. Comment card for soliciting feedback on xxxx)

**PURPOSE:** Provide a brief description of the purpose of this collection and how it will be used. If this is part of a larger study or effort, please include this in your explanation.

**DESCRIPTION OF RESPONDENTS:** Provide a brief description of the targeted group or groups for this collection of information. These groups must have experience with the program.

**TYPE OF COLLECTION:** Check one box. If you are requesting approval of other instruments under the generic, you must complete a form for each instrument.

**CERTIFICATION:** Please read the certification carefully. If you incorrectly certify, the collection will be returned as improperly submitted or it will be disapproved.

**Personally Identifiable Information:** Provide answers to the questions.

**Gifts or Payments:** If you answer yes to the question, please describe the incentive and provide a justification for the amount.

**BURDEN HOURS:**

**Category of Respondents:** Identify who you expect the respondents to be in terms of the following categories: (1) Individuals or Households; (2) Private Sector; (3) State, local, or tribal governments; or (4) Federal Government. Only one type of respondent can be selected.

**No. of Respondents:** Provide an estimate of the Number of respondents.

**Participation Time:** Provide an estimate of the amount of time required for a respondent to participate (e.g. fill out a survey or participate in a focus group)

**Burden:** Provide the Annual burden hours: Multiply the Number of responses and the participation time and divide by 60.

**FEDERAL COST:** Provide an estimate of the annual cost to the Federal government.

**If you are conducting a focus group, survey, or plan to employ statistical methods, please provide answers to the following questions:**

**The selection of your targeted respondents.** Please provide a description of how you plan to identify your potential group of respondents and how you will select them. If the answer is yes, to the first question, you may provide the sampling plan in an attachment.

**Administration of the Instrument:** Identify how the information will be collected. More than one box may be checked. Indicate whether there will be interviewers (e.g. for surveys) or facilitators (e.g., for focus groups) used.

**Please make sure that all instruments, instructions, and scripts are submitted with the request.**

## Go Direct FICorp Website Survey

In an effort to continuously improve the Go Direct FICorp Website, we would like your feedback on how functional the site is to you. Your responses are anonymous.

What type of organization do you represent?

- Financial Institution (bank, credit union)
- Corporate Institution (all other)

How often do you use the Go Direct FICorp Website?

- Daily
- Weekly
- Monthly or less

What type of Direct Deposit enrollments do you most often enter at one session/sitting?

- Single/Individual enrollments (for one person)
- Multiple enrollments (for different people)
- Both Single and Multiple enrollments

On average how many enrollments do you process during a session/sitting?

- 1
- 2 to 5
- 6 to 10
- 10 to 20
- Greater than 20

While entering enrollment data, what percentage of the time is the check recipient/customer available in person to provide enrollment information to you?

- Always (100%)
- Often (75%)
- Sometime (50%)
- Rarely (25%)
- Never (0% - entering from paper enrollment form or other documentation)

When entering an enrollment, what percentage of time do you have a copy of the recipient's benefit check available?

- Always (100%)
- Often (75%)
- Sometimes (50%)
- Rarely (25%)
- Never (0%)

Would you prefer to no longer provide a username/password to access the FICorp website?

- Yes (this change would save time)
- No
- Indifferent (does not matter to me)

Do you ever use the Go Direct public website ([www.godirect.gov](http://www.godirect.gov)) as an alternative to the FICorp website for single/individual enrollments?

- Yes
- No

Would you be interested in bulk/batch enrollment processing if it were available?

- Yes
- No
- Indifferent (does not matter to me)

Please list anything you like to change about the current Go Direct FICorp Website.

*2500 character maximum*