



BUREAU OF LABOR STATISTICS  
U.S. DEPARTMENT OF LABOR

**OFFICE OF SURVEY METHODS RESEARCH**  
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**FACSIMILE TRANSMITTAL**


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<b>DATE:</b>	<u>3/4/2011</u>	<b>No. of Pages:</b>	<u>2</u>
<b>TO:</b>	<u>Jean Grossman</u>	<b>Fax No:</b>	<u>202-693-4641</u>
<b>FROM:</b>	<u>John Ettinge</u>	<b>Phone No:</b>	<u>202-691-7404</u>

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**MESSAGE:**

**U.S. DEPARTMENT OF LABOR  
Bureau of Labor Statistics Concurrence of Surveys Employing Statistical Methods**

<b>TO:</b> Jean Grossman, Chief Evaluation Officer	<b>DATE:</b> 3/4/2011
<b>PHONE:</b> (202) 693-5924 <b>FAX:</b> (202) 693-4641	
<b>FROM:</b> John Elzinga	<b>PHONE:</b> 202-691-7404
[Enter name of BLS reviewer]	
<b>ACTION:</b> Review the attached report proposal, indicate approval or disapproval and return to the Sponsoring agency or program. Comments shall not be made on the proposed report but in the comments space below.	
<b>TITLE OF SURVEY OR EVALUATION</b> 2011 Family Medical Leave Act Employee and Employer Survey	
<b>CLEARANCE</b> <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved (See comments below)	
<b>COMMENTS</b> (Insert additional pages as needed)	
<b>(Attach sheet if additional space is necessary)</b>	
Disclaimer: BLS is approving only the statistical methodology as presented in the written documentation, and not necessarily passing judgment on the questionnaire itself nor on the necessity to conduct the collection of information.	
<b>SIGNATURE OF BLS REVIEWER</b> 	<b>DATE</b> 3/14/2011