PAPERWORK REDUCTION ACT USITC IMPORT INJURY INVESTIGATIONS GENERIC CLEARANCE SUBMISSION **OMB CONTROL NUMBER 3117-0016**

This form should only be used if you are submitting a collection of information for approval under the USITC import injury investigation clearance assigned OMB Control Number 3117-0016. Submit this form, responses to the supplemental questions (if necessary), the collection instrument, and any additional documentation to: Office of Information and Regulatory Affairs, Office of Management and Budget, Docket Library, Room 10102, 725 17th Street NW, Washington, D.C. 20503.

If the collection does not satisfy the requirements of the program clearance, you should follow the regular PRA clearance procedures described in 5 CFR 1320.

Agency contact (person who can best answer questions about the content of the submission)

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Title of review scheduled for institution		USITC number ¹	Number of respondents (1)	Hours per response (2)	oonse burden hours Cu		Cumulative burden hours ¹
Bearings		12-5-253	3	10		30	30
Lined Paper School Supplies		12-5-254	3	10	30		60
Silicomanganese		12-5-255	3	10	30		90
Ferrovanadium		12-5-256	3	10		30	120
Fresh Garlic		12-5-257	3	10		30	150
Furfuryl Alcohol		12-5-258	3	10		30	180
¹ Obtain fr	om the Statistical Servi	ces Division.					
Control Nu	ımber 3117-0016.	information rec	uested by this subm	ission meet the require	ment of the OM	В арг	proval for OMB
/s/ Catherine DeFilippo Signature of Program Official			Date				
<u>/s/ Catherine DeFilippo</u> Signature of USITC Paperwork Clearance Officer Date							
	ture of OIRA Official	Sicurumet (
Date submitted to OMB]	Date approval recei	ved		