


## PAPERWORK REDUCTION ACT CHANGE WORKSHEET

Agency/subagency  DHS/USCIS		OMB Control Number  _____ 1615 _____ . 0125 _____	
<i>Enter only items that change</i>			
		Current record	New record
Agency form number (s) M-1061			
Annual reporting and recordkeeping hour burden			
Number of respondents			
Total annual responses			
Percent of these responses collected electronically	%		%
Total annual hours			
Difference			
Explanation of difference			
Program change Adjustment			
Annual reporting and recordkeeping cost burden (in thousands of dollars)			
Total annualized Capital/Startup costs			
Total annual costs (O&M)			
Total annualized cost requested			
Difference			
Explanation of difference			
Program change Adjustment			
Other changes** See Justification.			
Signature of Senior Official or designee:  Evadne Hagigal 		Date:  6/9/2015	For OIRA Use  _____ _____

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