**INSTRUCTIONS:** Use this form when a single information collection document involves multiple reporting and recordkeeping requirements. The totals of the figures in cols. should be entered in item 13 of OMB-83-1: cols. (D) &/or (I) = 13a (respondent is only counted once); cols. F & I = 13b; cols. H & K = 13c.

Electronic Mailing List Subscription Form - Nutritions and Food

TITLE OF INFORMATION COLLECTION DOCUMENT

омв **NO**. 0518-0036

(K)Total/(I)Total = (J)Average

 $(F) Total/(D) Total = (E) Average \qquad (H) Total/(F) Total = (G) Average$ 

DATE PREPARED

NOTE: The columns will calculate automatically. If Col. E's response is something other than annually, i.e., 1/6 years, list as "1/6" & decimal will display.

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September 15 2015\

									Septembe	1 13 2013\
IDENTIFICATION OF REPORTING OR RECORDKEEPING REQUIREMENT			ANNUAL BURDEN							
			REPORTS					RECORDS		
										TOTAL
		FORMS NO (S)	NO. OF	NO OF	TOTAL ANNUAL	HOURS	TOTAL	NO. OF	ANNUAL	RECORD-
SECTION OF	DESCRIPTION	(If "none"	RESPONDENTS	RESPONSES	RESPONSES	PER	HOURS	RECORD-	HOURS PER	KEEPING HOURS
REGS.		so state)		PER RESPONDENT	(Col. D x E)	RESPONSE	(Col. F x G)	KEEPERS	RECORD- KEEPER	(Col. I x J)
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(1)	(J)	(K)
	FNIC Nutrition Talk	None	200	1.0000	200.00	0.0170	3.40			
	Mealtalk	None	200	1.0000	200.00	0.0170	3.40			
	Successtalk	None	200	1.0000	200.00	0.0170	3.40			
	Summertalk	None	100	1.0000	100.00	0.0170	1.70			
	Team Nutrition	None	200	1.0000	200.00	0.0154	3.08			
	Electronic Mailing List Sign Up Form	None	100	1.0000	100.00	0.0170	1.70			
	,	1,000.00		1,000.00		16.68				