# Request for Approval under the "Generic Clearance for the Collection of Routine Customer Feedback" (OMB Control Number: 3235-0731)

**TITLE OF INFORMATION COLLECTION:** U.S. Securities and Exchange Commission Eventbrite Registration Survey

**PURPOSE:** The U.S. Securities and Exchange Commission (SEC) is seeking approval for the voluntary collection of survey response data from registrants for the SEC's Annual Government-Business Forum on Small Business Capital Formation (Forum), tentatively scheduled for July 2020. The responses gathered from registrants will serve to inform the planning, agenda, and operation of the Forum.

**DESCRIPTION OF RESPONDENTS**: Persons registering for the Forum may provide survey responses as part of their registration. These respondents may include government officials, private businesses, law firms, and anyone from the public interested in attending.

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TYPE OF COLLECTION: (Check one)	
[ ] Customer Comment Card/Complaint Form [ ] Usability Testing (e.g., Website or Software [ ] Focus Group	
CERTIFICATION:	
<ol> <li>I certify the following to be true:</li> <li>The collection is voluntary.</li> <li>The collection is low-burden for respondents a</li> <li>The collection is non-controversial and does nagencies.</li> </ol>	
<ul><li>4. The results are <u>not</u> intended to be disseminated</li><li>5. Information gathered will not be used for the policy decisions.</li></ul>	*
6. The collection is targeted to the solicitation of experience with the program or may have exp	1
Name:	
To assist review, please provide answers to the fo	llowing question:
Personally Identifiable Information:	
1. Is personally identifiable information (PII) col	
2. If Yes, is the information that will be collected	l included in records that are subject to the
Privacy Act of 1974? [X] Yes [] No	hoon muhikahoda [V]Voo []Nio
3. If Applicable, has a System or Records Notice <b>Gifts or Payments:</b>	e been published? [X] Yes [] No
Is an incentive (e.g., money or reimbursement of	expenses token of appreciation) provided to
participants? [] Yes [X] No	expenses, token of appreciation, provided to

### **BURDEN HOURS**

Category of Respondent	No. of	Participation	Burden
	Respondents	Time	
Forum registrants	150	10 minutes each	25 hrs
Totals	150	10 minutes each	25 hrs

**FEDERAL COST:** The estimated annual cost to the Federal government is \$800

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 [X] 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?

N/A

#### Administration of the Instrument

1.	How will you collect the information? (Check all that apply)
	[ X ] Web-based or other forms of Social Media
	[ ] Telephone
	[ ] In-person
	[ ] Mail
	[ ] Other, Explain
2.	Will interviewers or facilitators be used? [ ] Yes [ X ] 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"

**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.