

**PAPERWORK REDUCTION ACT**  
**CHANGE WORKSHEET**

<b>Agency/Subagency</b>		<b>OMB control number</b> — — — — — —
<i>Enter only items that change</i>		
<b>Current record</b>		<b>New record</b>
<b>Agency form number(s)</b>		
<b>Annual reporting and recordkeeping hour burden</b>		
Number of respondents		
Total annual responses		
Percent of these responses collected electronically		%
Total annual hours		
Difference		
Explanation of difference		
Program change		
Adjustment		
<b>Annual reporting and recordkeeping cost burden (in thousands of dollars)</b>		
Total annualized Capital/Startup costs		
Total annual costs (O&M)		
Total annualized cost requested		
Difference		
Explanation of difference		
Program change		
Adjustment		
<b>Other changes**</b>		
<b>Signature of Senior Official or designee:</b>  <i>Martha M. Castro</i>		<b>Date:</b>  _____
<b>For OIRA Use</b>  _____		

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