



**U.S. SMALL BUSINESS ADMINISTRATION  
RECORD OF CLEARANCE AND APPROVAL**

IDENTIFICATION NO.

SUBJECT  
ASMPP Information Collection Submission

**PERSON TO BE CONTACTED ON ATTACHED**

NAME	OFFICE	PHONE
Lori Gillen	G CBD/ASMPP	202-205-6349

EXPLANATION

Two ASMPP forms--2459 and 2460--are due to expire in August 2019. This Information Collection submission requests approval for the modification of these two forms.

**RELEASED FOR CLEARANCE AND DISTRIBUTION**

*If this document is to be distributed electronically, I certify that the accompanying disk contains only one WordPerfect file, which is identical to the official signed document attached.*

TITLE	SIGNATURE	DATE	DEADLINE DATE FOR CLEARANCE
DAA/GCBD		7/2/19	

CONCURRENCE IS ASSUMED IF NOT RETURNED BY THE DEADLINE DATE

OFFICE/OFFICIAL	SIGNATURE	DATE	CONCUR		NON-CONCUR	COMMENT ADOPTED
			No Comment	Comment		
OIG/Travis Farris			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OGC/Yvonne Walters		8/26/19	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<i>As provided by email</i>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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APPROVED (TITLE)		ROOM NO.
	RETURN TO _____	



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OGC/Yvonne Walters	<i>[Signature]</i>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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