# Request for Approval under the "Generic Clearance for the Collection of Mandatory Grant Financial Reports" (OMB Control Number: 0970-0510) Expiration date 05/31/2021

**TITLE OF INFORMATION COLLECTION:** Child Support Enforcement Program Financial Reporting Forms OCSE-396 and OCSE-34.

### **PURPOSE:**

The information collected through the use of these forms is used to:

- a. Monitor program operations and prepare technical assistance and guidance as needed and in accordance with section 452(a)(7) of the Act;
- b. Compute the quarterly grant awards pursuant to section 455(b) of the Act;
- c. Determine that proper disposition of collections is being made according to the process set forth in section 457 of the Act;
- d. Enable OCSE to obtain data prior to the start of the fiscal year to estimate the incentive payments to be retained by each State. Also, to permit OCSE to calculate the actual amount of incentive payment due each State following the end of the fiscal year;
- f. Produce an annual financial and statistical report, when combined with information collected on Form OCSE-157, the "Annual Data Report." This report is available to the general public and includes a complete record of financial, statistical and programmatic information for the fiscal year.

**DESCRIPTION OF RESPONDENTS**: Each State or each Indian Tribe, Tribal organization and Tribal consortia (hereinafter, "Tribe") with an approved title IV-D plan to administer the Child Support Enforcement Program under title IV-D of the Social Security Act (hereinafter, "the Act"). Some information required on this report is applicable only to **State-run** programs and are clearly identified.

#### **Personally Identifiable Information:**

- 1. Is personally identifiable information (PII) collected? [ ] Yes [X ] No
- 2. If Yes, will any information that is collected be included in records that are subject to the Privacy Act of 1974? [] Yes [] No
- 3. If Yes, has an up-to-date System of Records Notice (SORN) been published? [] Yes [] No

Title of Information Collection	No. of Respondents	Annual Frequency of Responses	Hourly Burden per Response	Annual Hourly Burden
Form OCSE-396	54	Quarterly	6	1,296
Form OCSE-34	114	Quarterly	14	6,384
Totals	168	Quarterly	20	7,680

#### **BURDEN HOURS**

Category of Respondent: State, local or tribal governments.

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.

**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.

**Personally Identifiable Information:** Provide answers to the questions. Note: Agencies should only collect PII to the extent necessary, and they should only retain PII for the period of time that is necessary to achieve a specific objective.

### **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 per row.
No. of Respondents: Provide an estimate of the Number of Respondents.
Burden per Response: Provide an estimate of the amount of time (in minutes) 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 Respondents, times Frequency times Burden per Response.

FEDERAL COST: Provide an estimate of the annual cost to the Federal government.