

**PAPERWORK REDUCTION ACT
CHANGE WORKSHEET**

| | |
|------------------------------------|--|
| Agency/Subagency DHS/CBP | OMB control number 1 6 5 1 - 0 1 3 6 |
|------------------------------------|--|

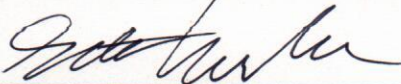
Enter only items that change

| | Current record | New record |
|------------------------------|----------------|------------|
| Agency form number(s) | | |

| | Current record | New record |
|---|----------------|------------|
| Annual reporting and recordkeeping hour burden | | |
| Number of respondents | | |
| Total annual responses | 60,000 | 300,000 |
| Percent of these responses collected electronically | % | % |
| Total annual hours | 13,000 | 24,990 |
| Difference | | -11,990 |
| Explanation of difference | | |
| Program change | | |
| Adjustment | | |

| | Current record | New record |
|---|----------------|------------|
| Annual reporting and recordkeeping cost burden (in thousands of dollars) | | |
| Total annualized Capital/Startup costs | | |
| Total annual costs (O&M) | | |
| Total annualized cost requested | 0.00 | 0.00 |
| Difference | | 0.00 |
| Explanation of difference | | |
| Program change | | |
| Adjustment | | |

Other changes**
CBP is increasing the use of Surveys to obtain greater feedback from the public, the increased use requires a larger approved Response and Burden request.

| | | |
|---|-------------------------|------------------------------|
| Signature of Senior Official or designee:  | Date: 6-27-18 | For OIRA Use _____ |
|---|-------------------------|------------------------------|

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