

# PAPERWORK REDUCTION ACT CHANGE WORKSHEET

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |   |                                         |                                    |  |
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| Agency/subagency                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |   | OMB Control Number<br><br>_____ - _____ |                                    |  |
| <i>Enter only items that change</i><br><div style="display: flex; justify-content: space-between;"> <span>Current record</span> <span>New record</span> </div>                                                                                                                                                                                                                                                                                                                                                     |   |                                         |                                    |  |
| Agency form number (s)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |   |                                         |                                    |  |
| Annual reporting and recordkeeping hour burden<br><br><div style="margin-left: 20px;">Number of respondents</div> <div style="margin-left: 20px;">Total annual responses</div> <div style="margin-left: 40px;">Percent of these responses collected electronically</div> <div style="margin-left: 20px;">Total annual hours</div> <div style="margin-left: 20px;">Difference</div> <div style="margin-left: 20px;">Explanation of difference</div> <div style="margin-left: 40px;">Program change Adjustment</div> |   |                                         |                                    |  |
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| Annual reporting and recordkeeping cost burden (in thousands of dollars)<br><br><div style="margin-left: 20px;">Total annualized Capital/Startup costs</div> <div style="margin-left: 20px;">Total annual costs (O&amp;M)</div> <div style="margin-left: 20px;">Total annualized cost requested</div> <div style="margin-left: 20px;">Difference</div> <div style="margin-left: 20px;">Explanation of difference</div> <div style="margin-left: 40px;">Program change Adjustment</div>                             |   |                                         |                                    |  |
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| Other changes**                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |   |                                         |                                    |  |
| Signature of Senior Official or designee:<br><br><div style="font-family: cursive; font-size: 1.2em; margin-left: 20px;">John R. Ramsay, Jr.</div>                                                                                                                                                                                                                                                                                                                                                                 |   | Date:                                   | For OIRA Use<br><br>_____<br>_____ |  |

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