PAPERWORK REDUCTION ACT
CHANGE WORKSHEET

Agency/Subagency	OMB control number
DHS/CBP	1 6 5 1 − 0 0 8 6

Enter only items that change

	Current record	New record
Agency form number(s)		
Annual reporting and recordkeeping hour burden		
Number of respondents		
Total annual responses		
Percent of these responses collected electronically	%	%
Total annual hours		
Difference		0
Explanation of difference		
Program change		
Adjustment		
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**

1) Update the Pay.gov instructions included as page 5 of CBP Form 7401. Minor language changes and reordering of instructions needed due to Pay.gov modernization of online platform. 2) correct spelling error on page 1. 3) Change CBP Mailing address on pages 2 and 5.

Signature of Senior Official or designee:	Date: 5/16/2024	For OIRA Use

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

OMB FORM 83-C, 10/95   Adobe Professional 7.0