

0232			TITLE OF INFORMATION COLLECTION DOCUMENT						OMB NO. 0560-0229				
			Nomination Form for County Farm Service Agency (FSA) Committee Election						DATE PREPARED April 1, 2024				
IDENTIFICATION OF REPORTING OR RECORDKEEPING REQUIREMENT			ANNUAL BURDEN										
SECTION OF REGS. (A)	DESCRIPTION (B)	FORMS NO (S) (If "none" so state) (C)	REPORTS					RECORDS			RESPONDENT COST		
			NO. OF RESPONDENTS (D)	NO OF RESPONSES PER RESPONDENT (E)	TOTAL ANNUAL RESPONSES (Col. D x E) (F)	HOURS PER RESPONSE (G)	TOTAL BURDEN HOURS (Col. F x G) (H)		NO. OF RECORD-KEEPERS (I)	ANNUAL HOURS PER RECORD-KEEPER (J)	TOTAL RECORD-KEEPING HOURS (Col. I x J) (K)	COST PER HOUR (L)	TOTAL COST (Col. H x L) (M)
							EXEMPT	NON-EXEMPT					
7 CFR 1708.1-2	Nomination Form for County FSA Committee Election	FSA-669, FSA-669A, FSA-669A-1 FSA-669A-2 FSA-669A-3	10,500	1	10,500	0.25		2,625				\$66.48	174,510
	SUBTOTAL				10,500			0	2,625			0.00	174,510
	TOTAL OF ALL PAGES				10,500			0	2,625			0.00	174,510
TOTAL - COLUMNS "F" AND "I" = OMB 83-I, 13b; COLUMNS "H" AND "K" = OMB 83-I, 13c					10,500				2,625				