

INSTRUCTIONS: Use this form when a single information collection document involves multiple reporting and recordkeeping requirements. The totals of the figures in cols. should be entered in item 13 of OMB-83-I: cols. (D) &/or (I) = 13a (respondent is only counted once); cols. F & I = 13b; cols. H & K = 13c.
 (F)Total/(D)Total = (E)Average (H)Total/(F)Total = (G)Average (K)Total/(I)Total = (J)Average
NOTE: The columns will calculate automatically. If Col. E's response is something other than annually, i.e., 1/6 years, list as "1/6" & decimal will display.

TITLE OF INFORMATION COLLECTION DOCUMENT
**Assignments of Payments and Joint Payment Authorization;
 Request for Waiver**

OMB NO. 0560-0183
DATE PREPARED
 September 5, 2024

IDENTIFICATION OF REPORTING OR RECORDKEEPING REQUIREMENT		FORMS NO (S) (If "none" so state)	ANNUAL BURDEN									
SECTION OF REGS. (A)	DESCRIPTION (B)		REPORTS				TOTAL BURDEN HOURS (Col. F x G) (H)		RECORDS		COST PER HOUR (L)	
			NO. OF RESPONDENTS (D)	NO OF RESPONSES PER RESPONDENT (E)	TOTAL ANNUAL RESPONSES (Col. D x E) (F)	HOURS PER RESPONSE (G)	EXEMPT	NON-EXEMPT	NO. OF RECORD-KEEPERS (I)	ANNUAL HOURS PER RECORD-KEEPER (J)		TOTAL RECORD-KEEPING HOURS (Col. I x J) (K)
7 CFR 1404.4	Assignment of Payments	CCC-36 or CCC-36 (SP)	46,522	6	279,132	0.17		46,522				\$57.76
None	Joint Payment Authorization	CCC-37 or CCC- 37 (SP)	3,162	2	6,324	0.17		1,054				\$57.76
31 CFR Part 208	Request For FSA Payment of Federal Benefits by Check	FPAC-FM-12	152,928	1	152,928	0.17		25,386				\$57.82
SUBTOTAL					438,384			0	72,962			0.00
TOTAL OF ALL PAGES					438,384				72,962			0.00
TOTAL - COLUMNS "F" AND "I" = OMB 83-I, 13b; COLUMNS "H" AND "K" = OMB 83-I, 13c					438,384				72,962			

IDENT COST

TOTAL COST (Col. H x L)
(M)
2,687,100
60,877
1,467,821
4,215,798
4,215,798