

**PAPERWORK REDUCTION ACT  
CHANGE WORKSHEET**

<b>Agency/Subagency</b>	<b>OMB control number</b> -----
-------------------------	------------------------------------

*Enter only items that change*

**Current record**

**New record**

<b>Agency form number(s)</b>		
------------------------------	--	--

<b>Annual reporting and recordkeeping hour burden</b>		
Number of respondents		
Total annual responses		
Percent of these responses collected electronically	%	%
Total annual hours		
Difference		
Explanation of difference		
Program change		
Adjustment		

<b>Annual reporting and recordkeeping cost burden (in thousands of dollars)</b>		
Total annualized Capital/Startup costs		
Total annual costs (O&M)		
Total annualized cost requested		
Difference		
Explanation of difference		
Program change		
Adjustment		

<b>Other changes**</b>
------------------------

<b>Signature of Senior Official or designee:</b>  <i>Christina A. Walsh</i>	<b>Date:</b>	<b>For OIRA Use</b> _____
---	--------------	------------------------------

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