## NOTICE OF OFFICE OF MANAGEMENT AND BUDGET ACTION

Date 03/17/2020

Department of Health and Human Services
Administration for Children and Families

FOR CERTIFYING OFFICIAL: Jose Arrieta
FOR CLEARANCE OFFICER: Debbie Kramer

In accordance with the Paperwork Reduction Act, OMB has taken action on your request received

01/27/2020

ACTION REQUESTED: New collection (Request for a new OMB Control Number)

TYPE OF REVIEW REQUESTED: Regular

ICR REFERENCE NUMBER: 202001-0970-006

AGENCY ICR TRACKING NUMBER: OTIP

TITLE: <u>Domestic Victims of Human Trafficking Program Data</u>

LIST OF INFORMATION COLLECTIONS: See next page

OMB ACTION: Approved without change

OMB CONTROL NUMBER: 0970-0542

The agency is required to display the OMB Control Number and inform respondents of its legal significance in

accordance with 5 CFR 1320.5(b).

EXPIRATION DATE: 03/31/2023 DISCONTINUE DATE:

BURDEN:	RESPONSES	HOURS	COSTS
Previous	0	0	0
New	3,772	1,423	0
Difference			
Change due to New Statute	0	0	0
Change due to Agency Discretion	3,772	1,423	0
Change due to Agency Adjustment	0	0	0
Change due to PRA Violation	0	0	0

## TERMS OF CLEARANCE:

OMB Authorizing Official: Dominic J. Mancini

Deputy and Acting Administrator,

Office Of Information And Regulatory Affairs

List of ICs				
IC Title	Form No.	Form Name	CFR Citation	
Client Characteristics and Enrollment Form	1	Client Characteristics and Enrollment Form		
Client Service Use and Delivery Form	2	Client Service Use and Delivery Form		
Client Case Closure Form	3	Client Case Closure Form		
Barriers to Service Delivery and Monitoring Form	4	Barriers to Service Delivery and Monitoring Form		
DVHT Spending Form	5	DVHT Spending Form		
Partnership Development Enrollment Form	6	Partnership Development Enrollment Form		
Partnership Development Exit Form	7	Partnership Development Exit Form		
Training Form	8	Training Form		
Victim Outreach Form	9	Victim Outreach Form		