

**REQUEST FOR CLEARANCE OF REPORT**

**INSTRUCTIONS:** Please type in triplicate. Complete applicable items and send form in duplicate with attachments to your Reports Management Officer.

**ATTACH:** Justification for report (2 copies) explaining need; authorization and/or requirement; proposed use; cost/benefit evaluation; and identify other reports superseded. If revised, describe change and reason. If eliminated or transferred, provide brief explanation. Also attach two copies of proposed report form or format, proposed requiring directive and reporting instructions.

See General Administration Manual Chapter 10-00 for additional information.

1. REPORTS APPROVAL SYMBOL

2. FORM NO.(S) (if any)

3. FREQUENCY (Weekly, Monthly, etc.)

4. DUE DATE IN REQUIRING OFFICE

5. TITLE OF REPORT

6. TYPE OF REPORT ACTION

- NEW  REVISED  
 ELIMINATED  RESPONSIBILITY TRANSFERRED

7. RESPONDING ORGANIZATIONS

8. BRIEF DESCRIPTION OF REPORT CONTENTS (Attach 2 copies of form or format)

9. DATA SOURCES (Specifically identify each source--e.g., form numbers, records, public reports, etc.)

10. ESTIMATED WORKLOAD AND COSTS FOR THIS REPORT (Retain supporting documents and worksheets)

10a. DEVELOPMENTAL COSTS TO ESTABLISH REPORT			10b. ANNUAL PREPARATION, PROCESSING & USING COSTS		
ACTIVITY	MAN-HOURS	RELATED COSTS	ACTIVITY	MAN-HOURS	RELATED COSTS
ALL ASSOCIATED WORK TO DESIGN AND ESTABLISH REPORT		\$	PREPARING AND PROCESSING IN RESPONDING ORGANIZATIONS		\$
			EAM AND EDP PROCESSING		\$
EAM AND EDP DEVELOPMENT		\$	PROCESSING AND USING IN REQUIRING ORGANIZATION		\$
			PRINTING AND DISTRIBUTION		
<b>TOTALS</b>		\$	<b>TOTALS</b>		\$
<b>TOTAL ESTABLISHMENT COST WITH MAN-HOURS CONVERTED TO \$</b>	\$		<b>TOTAL ANNUAL COST WITH MAN-HOURS CONVERTED TO \$</b>	\$	

11. REQUIRING OFFICE (Identify specific division, branch, etc.)

PERSON TO CONTACT	TELEPHONE
TITLE OF REQUIRING OFFICIAL	
SIGNATURE OF REQUIRING OFFICIAL	DATE

12. <input type="checkbox"/> CONCUR <input type="checkbox"/> DO NOT CONCUR	SIGNATURE OF REVIEWING OFFICIAL	TITLE	DATE
<input type="checkbox"/> CONCUR <input type="checkbox"/> DO NOT CONCUR	SIGNATURE OF REVIEWING OFFICIAL	TITLE	DATE
13. <input type="checkbox"/> CONCUR <input type="checkbox"/> DO NOT CONCUR	SIGNATURE OF REPORTS MANAGEMENT OFFICER		DATE