

# NOTICE OF OFFICE OF MANAGEMENT AND BUDGET ACTION

Date 06/15/2023

Department of Health and Human Services  
Substance Abuse and Mental Health Services

FOR CERTIFYING OFFICIAL: Karl Mathias  
FOR CLEARANCE OFFICER: Sherrette Funn

In accordance with the Paperwork Reduction Act, OMB has taken action on your request received  
05/02/2023

ACTION REQUESTED: Revision of a currently approved collection

TYPE OF REVIEW REQUESTED: Regular

ICR REFERENCE NUMBER: 202304-0930-002

AGENCY ICR TRACKING NUMBER:

TITLE: Community MH Services BG and SAPT BG Application Guidance and Instructions FY 2024-2025

LIST OF INFORMATION COLLECTIONS: See next page

OMB ACTION: Approved with change

OMB CONTROL NUMBER: 0930-0168

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: 06/30/2026

DISCONTINUE DATE:

BURDEN:	RESPONSES	HOURS	COSTS
Previous	119	33,493	0
New	119	24,613	0
Difference			
Change due to New Statute	0	0	0
Change due to Agency Discretion	0	-8,880	0
Change due to Agency Adjustment	0	0	0
Change due to PRA Violation	0	0	0

TERMS OF CLEARANCE: OMB is approving this information collection request for a period of three years during which time the agency will request approval to extend or revise the collection if the agency seeks to continue the information collection activity beyond the period approved under this action.

OMB Authorizing Official: Dominic J. Mancini  
Deputy Administrator,  
Office Of Information And Regulatory Affairs

List of ICs

IC Title	Form No.	Form Name	CFR Citation
Block Grant Application	SAMHSA_BG_Application_20 24-25	SAMHSA_BG_Application_20 24-25	