

4. Trade Health Insurance Coverage Assistance

All quarterly entries are CUMULATIVE over all previous quarters.

PERFORMANCE FACTOR	PROGRAM YEAR QUARTER							
IMPLEMENTATION SCHEDULE								
TOTAL PARTICIPANTS								
Receiving Support Services								
Rec. Needs-Related Payments								
Rec. Health Coverage Payments								
EXPENDITURE SCHEDULE								
TOTAL EXPENDI- TURES								
NRPs								
Support Services								
Other								
Health Coverage Payments								
Total Admin. excl. NRPs/Health Coverage Payments								
- Indirect								
NRP Admin.								
Health Coverage Payment. Admin.								

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The reporting requirements are approved by OMB according to the Paperwork Reduction Act of 1995 under OMB approval No. 1205-0439. **NOTE:** Persons are not required to respond to this collection of information unless it displays a currently valid OMB control number. Respondent's obligation to reply to these reporting requirements are mandatory (PL: 107-210). Public reporting burden for this collection of information is estimated at 90 minutes.

Send comments regarding the burden estimate or any other aspect of this collection, including suggestions for reducing this burden to the U.S. Department of Labor, Office of National Response, Room N-5422, Washington D.C. 20210. (Paperwork Reduction Project 1205-0439).