Texas; Newton Delaware Financial Corporation, Dover, Delaware; and CountyBank, National Association, Newton, Texas.

In connection with this application, CBFH, Inc., Beaumont, Texas, also has applied to become a bank holding company by acquiring 100 percent of the voting shares of County Bancshares, Inc., Newton, Texas, and thereby indirectly acquire voting shares of Newton Delaware Financial Corporation, Dover, Delaware, and CountyBank, National Association, Newton, Texas.

Board of Governors of the Federal Reserve System, May 11, 2007.

Jennifer J. Johnson,

Secretary of the Board.

[FR Doc. E7–9441 Filed 5–17–07; 8:45 am]

BILLING CODE 6210–01–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

[Document Identifier: OS–0990–0000]

30-Day Notice

AGENCY: Office of the Secretary, HHS.

ACTION: Agency information collection activities: proposed collection; comment request.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Office of the Secretary (OS), Department of Health and Human Services, is publishing the following summary of a proposed collection for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

Type of Information Collection Request: New collection.

Title of Information Collection: Understanding Barriers and Successful Strategies for Faith-Based Organizations in Accessing Grants.

Form/OMB No.: OS–0990–0000.

Use: The Understanding Barriers and Successful Strategies for Faith-Based Organizations (FBOs) in Accessing Grants study will identify perceived or underlying barriers faith-based organizations may face in applying for federal discretionary grants, as well as identify the strategies and approaches used by successful applicants. The data gathered will help Health and Human Services understand the effectiveness of its past internal efforts to ensure that FBOs had equal access to grants, and whether additional steps should be considered. Additionally, this study should provide future FBO grant applicants, as well as other nonprofit organizations, information that could be used to improve the quality of their grant applications and their capacity to seek federal funding.

Frequency: Single time.

Affected Public: Not-for-profit institutions.

Annual Number of Respondents: 290.

Total Annual Responses: 290.

Average Burden Per Response: 35.2 minutes.

Total Annual Hours: 170.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, e-mail your request, including your address, phone number, OMB number, and OS document identifier, to *Sherette.funncoleman@hhs.gov*, or call the Reports Clearance Office on (202) 690–6162. Written comments and recommendations for the proposed information collections must be received within 30 days of this notice directly to the Desk Officer at the address below:

OMB Desk Officer: John Kraemer, OMB Human Resources and Housing Branch, Attention: (OMB #0990–0000), New Executive Office Building, Room 10235, Washington DC 20503.

Dated: May 10, 2007.

Alice Bettencourt,

Office of the Secretary, Paperwork Reduction Act Reports Clearance Officer.

[FR Doc. E7–9529 Filed 5–16–07; 8:45 am]

BILLING CODE 4154–07–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Toxicology Program (NTP) Interagency Center for the Evaluation of Alternative Toxicological Methods (NICEATM); the Murine Local Lymph Node Assay: Request for Comments, Nominations of Scientific Experts, and Submission of Data

AGENCY: National Institute of Environmental Health Sciences (NIEHS), National Institutes of Health (NIH).

ACTION: Request for comments, submission of relevant data, and nominations of scientific experts.

SUMMARY: The Interagency Coordinating Committee on the Validation of Alternative Methods (ICCVAM) received a nomination from the U.S. Consumer Product Safety Commission (CPSC) to evaluate the validation status of: (1) The murine local lymph node assay (LLNA) as a stand-alone assay for determining potency (including severity) for the purpose of hazard classification; (2) the ''cut-down'' or ''limit dose'' LLNA approach; (3) non-radiolabeled LLNA methods; (4) the use of the LLNA for testing mixtures, aqueous solutions, and metals; and (5) the current applicability domain (i.e., the types of chemicals and substances for which the LLNA has been validated). ICCVAM reviewed the nomination, assigned it a high priority, and proposed that NICEATM and ICCVAM carry out the following activities in its evaluation: (1) Initiate a review of the current literature and available data, including the preparation of a comprehensive background review document, and (2) convene a peer review panel to review the various proposed LLNA uses and procedures for which sufficient data and information are available to adequately assess their validation status. ICCVAM also recommends development of performance standards for the LLNA. At this time, NICEATM requests: (1) Public comments on the appropriateness and relative priority of these activities, (2) nominations of expert scientists to consider as members of a possible peer review panel, and (3) submission of data for the LLNA and/or modified versions of the LLNA.

DATES: Submit comments, data, and nominations by June 15, 2007. Relevant data will also be accepted after this date and considered when feasible.

ADDRESSES: Dr. William S. Stokes, NICEATM Director, NIEHS, P.O. Box 12233, MD EC–17, Research Triangle Park, NC 27709, (fax) 919–541–0947, (e-mail) *niceatm@niehs.nih.gov.* Courier address: NICEATM, 79 T.W. Alexander Drive, Building 4401, Room 3128, Research Triangle Park, NC 27709. Responses can be submitted electronically at the ICCVAM–NICEATM Web site: *http://iccvam.niehs.nih.gov/contact/FR_pubcomment.htm* or by e-mail, mail, or fax.

FOR FURTHER INFORMATION CONTACT: Other correspondence should be

directed to Dr. William S. Stokes (919–541–2384 or *niceatm@niehs.nih.gov*).

SUPPLEMENTARY INFORMATION:

Background

ICCVAM previously evaluated the validation status of the LLNA as a stand-alone alternative method to the Guinea Pig Maximization Test (GPMT) and the Buehler Assay (NIH publication No. 99–4494; available at *http://iccvam.niehs.nih.gov/methods/immunotox/llna.htm*). Based on this evaluation, ICCVAM recommended the LLNA as a valid substitute for the guinea pig methods for most testing situations. The Environmental Protection Agency, Food and Drug Administration, and the CPSC subsequently accepted the method as a valid substitute. The OECD also adopted the LLNA as OECD Test Guideline 429.

In January 2007, the CPSC submitted a nomination to NICEATM (*http://iccvam.niehs.nih.gov/SuppDocs/submission.htm*) requesting that ICCVAM assess the validation status of:

- The LLNA as a stand-alone test for potency determinations (including severity) for the purpose of hazard classification.
- LLNA protocols that do not require the use of radioactive materials.
- The LLNA ''cut-down'' or ''limit dose'' procedure.
- The ability of the LLNA to test mixtures, aqueous solutions, and metals.
- The current applicability domain (i.e., the types of chemicals and substances for which the LLNA has been determined to be useful).

Since 2003, ICCVAM has routinely developed performance standards for test methods; however, they were not developed for the LLNA, which was reviewed in 1999. Accordingly, ICCVAM proposes to now develop performance standards for the LLNA. Performance standards communicate the basis by which new proprietary and nonproprietary test methods have been determined to have sufficient relevance and reliability for specific testing purposes. Performance standards based on test methods accepted by regulatory agencies can be used to evaluate the reliability and relevance of other test methods that are based on similar scientific principles and measure or predict the same biological or toxic effect. On January 24, 2007, ICCVAM unanimously endorsed with a high priority: (1) Developing performance standards for the LLNA and (2) initiating a review of the available data and information associated with the CPSC nominated activities. A determination of which (if any) of the nominated activities will move forward will be made subsequent to this review and after consideration of comments by the public and the Scientific Advisory Committee on Alternative Toxicological Methods (SACATM). If a decision is made to proceed with evaluation of these test methods, ICCVAM and NICEATM propose convening a peer review panel to review the usefulness and limitations of each of the LLNA methods listed above. The panel would also formulate conclusions on the adequacy of draft ICCVAM performance standards, any proposed future validation studies, and draft ICCVAM-proposed standardized test method protocols.

Request for Public Comments and Nominations of Scientific Experts

NICEATM requests public comments on the appropriateness and relative priority of the nominated activities. NICEATM also requests the nominations of scientists with relevant knowledge and experience to serve on the panel if a panel meeting occurs. Areas of relevant expertise include, but are not limited to: physiology, pharmacology, immunology, skin sensitization testing in animals, development and use of in vitro methodologies, biostatistics, knowledge about the use of chemical datasets for validation of toxicity studies, and hazard classification of chemicals and products. Each nomination should include the person's name, affiliation, contact information (i.e., mailing address, e-mail address, telephone and fax numbers), curriculum vitae, and a brief summary of relevant experience and qualifications.

Request for Data

NICEATM invites the submission of data from standard LLNA testing (i.e., OECD TG 429) with mixtures, aqueous solutions, and/or metals, as well as corresponding data from human and other animal studies. In addition, NICEATM invites the submission of data supporting the use of (1) the LLNA as a stand-alone test for determining potency (including severity) for the purpose of hazard classification, (2) the LLNA ''cut-down'' or ''limit dose'' procedure, and (3) LLNA protocols that do not require the use of radioactivity. Although data can be accepted at any time, data submitted by June 15, 2007, will be considered during the ICCVAM evaluation process. Submitted data will be used to further evaluate the usefulness and limitations of the LLNA and may be incorporated into future NICEATM and ICCVAM reports and publications as appropriate. The data will also be included in a database to support the investigation of other test methods for assessing skin sensitization.

When submitting chemical and protocol information/test data, please reference this **Federal Register** notice and provide appropriate contact information (name, affiliation, mailing address, phone, fax, e-mail, and sponsoring organization, as applicable).

NICEATM prefers data to be submitted as copies of pages from study notebooks and/or study reports, if available. Raw data and analyses available in electronic format may also be submitted. Each submission for a chemical should preferably include the following information, as appropriate:

- Common and trade name.
- Chemical Abstracts Service Registry Number (CASRN).
- Chemical class.
- Product class.
- Commercial source.
- LLNA protocol used.
- Individual animal responses.
- The extent to which the study complied with national or international Good Laboratory Practice (GLP) guidelines.
- Date and testing organization.
- Sensitization data from other test methods.

Consideration by SACATM

On June 12, 2007, SACATM will meet at the Marriott Bethesda North Hotel and Conference Center in Bethesda, Maryland. The agenda includes consideration of the nominated LLNA activities, priorities, and proposed activities *http://ntp.niehs.nih.gov/go/7441*) and an opportunity for oral public comments. The SACATM meeting was announced in a separate **Federal Register** notice (**Federal Register** Vol. 72, No. 83, pp. 23831–32, May 1, 2007).

Background Information on ICCVAM and NICEATM

ICCVAM is an interagency committee composed of representatives from 15 federal regulatory and research agencies that use or generate toxicological information. ICCVAM conducts technical evaluations of new, revised, and alternative methods with regulatory applicability and promotes the scientific validation and regulatory acceptance of toxicological test methods that more accurately assess the safety and hazards of chemicals and products and that refine, reduce, or replace animal use. The ICCVAM Authorization Act of 2000 (42 U.S.C. 285l–3, available at *http://iccvam.niehs.nih.gov/about/PL106545.htm*) establishes ICCVAM as a permanent interagency committee of the

NIEHS under NICEATM. NICEATM administers ICCVAM and provides scientific and operational support for ICCVAM-related activities. NICEATM and ICCVAM work collaboratively to evaluate new and improved test methods applicable to the needs of federal agencies. Additional information about ICCVAM and NICEATM is available on the following Web site: *http://iccvam.niehs.nih.gov*.

Dated: May 8, 2007.

David A. Schwartz,

Director, National Institute of Environmental Health Sciences and National Toxicology Program.

[FR Doc. E7–9544 Filed 5–16–07; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Disease, Disability, and Injury Prevention and Control Special Emphasis Panel: Evaluation of Vaccination Reminder/Recall Systems for Adolescent Patients, Funding Opportunity Announcement (FOA) IP07–007, Strategies to Reach the ''Unreachable'' Through Immunization Registries, FOA IP07–010, and Using Provider Reminder/Recall to Enhance Up-to-Date Coverage of 18-Month Olds, FOA IP07–012

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), the Centers for Disease Control and Prevention (CDC) announces a meeting of the aforementioned Special Emphasis Panel.

Time and Date: 12 p.m.–4 p.m., June 18, 2007 (Closed).

Place: Teleconference.

Status: The meeting will be closed to the public in accordance with provisions set forth in section 552b(c)(4) and (6), Title 5 U.S.C., and the Determination of the Director, Management Analysis and Services Office, CDC, pursuant to Public Law 92–463.

Matters to be Discussed: The meeting will include the review, discussion, and evaluation of research grant applications in response to FOA IP07–007, ''Evaluation of Vaccination Reminder/Recall Systems for Adolescent Patients,'' FOA IP07–010, ''Strategies to Reach the ''Unreachable'' Through Immunization Registries,'' and FOA IP07–012, ''Using Provider Reminder/Recall to Enhance Up-to-Date Coverage of 18-Month Olds.''

For Further Information Contact: Trudy Messmer, Ph.D., Designated Federal Official, 1600 Clifton Road, Mailstop C–19, Atlanta, GA 30333, telephone (404) 639–3770.

The Director, Management Analysis and Services Office, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both CDC and the Agency for Toxic Substances and Disease Registry.

Dated: May 10, 2007.

Elaine L. Baker,

Acting Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

[FR Doc. E7–9498 Filed 5–16–07; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Healthcare Infection Control Practices Advisory Committee (HICPAC): Meeting

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), the Centers for Disease Control and Prevention (CDC) announces the aforementioned meeting.

Times and Dates: 8:30 a.m.–5 p.m., June 11, 2007. 8:30 a.m.–3 p.m., June 12, 2007.

Place: CDC Roybal Campus, Bldg 19, Auditorium B3, 1600 Clifton Road, NE., Atlanta, GA 30333.

Status: Open to the public, limited only by the space available.

Purpose: The Committee is charged with providing advice and guidance to the Secretary, the Assistant Secretary for Health, the Director, CDC, and the Director, National Center for Infectious Diseases (NCID), regarding (1) the practice of hospital infection control; (2) strategies for surveillance, prevention, and control of infections (e.g., nosocomial infections), antimicrobial resistance, and related events in settings where healthcare is provided; and (3) periodic updating of guidelines and other policy statements regarding prevention of healthcare-associated infections and healthcare-related conditions.

Matters to be Discussed: Agenda items will include: Guideline Planning, Discussion of Norovirus Guideline, Discussion of Urinary Track Infection Guideline, Healthcare Infection Control Information Technology follow up and Surveillance Definitions discussion.

Agenda items are subject to change as priorities dictate.

Contact Person for More Information: Angela B. Scott, Committee Management Specialist, HICPAC, Division of Healthcare Quality Promotion, NCID, CDC, l600 Clifton Road, NE., M/S A–07, Atlanta, GA 30333, telephone 404/639–1526.

The Director, Management Analysis and Services Office, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry.

Dated: May 10, 2007.

Elaine L. Baker,

Acting Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

[FR Doc. E7–9479 Filed 5–16–07; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Proposed Collection; Comment Request; Physicians' Experience of Ethical Dilemmas and Resource Allocation

SUMMARY: In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, for opportunity for public comment on proposed data collection projects, the National Institute of Dental and Craniofacial Research (NIDCR), the National Institutes of Health (NIH) will publish periodic summaries of proposed projects to be submitted to the Office of Management and Budget (OMB) for review and approval.

Proposed Collection

Title: Physicians' Experience of Ethical Dilemmas and Resource Allocation.

Type of Information Collection Request: New.

Need and Use of Information Collection: Health care costs are rising ceaselessly and there are currently no generally accepted way of controlling them. This study will access the experience of physicians regarding resource allocation in clinical practice, and how allocation decisions made at other levels shapes this experience. The primary objectives of the study are to determine if physicians make decisions to withhold interventions on the basis of cost, how often they report doing so, what types of care are withheld, and what criteria are used in making such decisions. The findings will provide valuable information concerning: (1) The practice of resource allocation in clinical practice, (2) the possible effects of perceived constraints on this practice, and (3) international comparisons on these two aspects.

Frequency of Response: Once.

Affected Public: Individuals or households; Businesses or other for-profit; Not-for-profit institutions.

Type of Respondents: Physicians.