

ANNUAL BURDEN ESTIMATES—Continued

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Affidavit-Paternity .....	54	4,819	.17	44,238
Locate Data Sheet .....	54	375	.08	1,620
Notice of Controlling Order .....	54	964	.08	4,164
Registration Statement .....	54	8,675	.08	37,476

*Estimated Total Annual Burden Hours:* 662,138.

*Additional Information:* Copies of the proposed collection may be obtained by writing to the Administration for Children and Families, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer. All requests should be identified by the title of the information collection. E-mail address: [infocollection@acf.hhs.gov](mailto:infocollection@acf.hhs.gov).

*OMB Comment:* OMB is required to make a decision concerning the collection of information between 30 and 60 days after publication of this document in the **Federal Register**. Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication. Written comments and recommendations for the proposed information collection should be sent directly to the following:

Office of Management and Budget, Paperwork Reduction Project, Fas: 202-

395-6974, Attn: Desk Officer for the Administration for Children and Families.

Dated: October 30, 2007.

**Robert Sargis,**

*Reports Clearance Officer.*

[FR Doc. 07-5493 Filed 11-5-07; 8:45 am]

**BILLING CODE 4184-01-M**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

**Submission for OMB Review; Comment Request**

*Title:* Guidance for the Tribal Temporary Assistance for Needy Families (TANF) Program.

*OMB No.:* 0970-0157.

*Description:* 42 U.S.C. 612 (Section 412 of the Social Security Act) requires each Indian Tribe that elects to

administer and operate a TANF program to submit a TANF Tribal Plan. The TANF Tribal Plan is a mandatory statement submitted to the Secretary by the Indian Tribe, which consists of an outline of how the Indian Tribe's TANF program will be administered and operated. It is used by the Secretary to determine whether the plan is approvable and to determine that the Indian Tribe is eligible to receive a TANF assistance grant. It is also made available to the public.

The Administration for Children and Families (ACF) is proposing to revise the guidance by adding a certification page and is requesting additional details regarding economic development. ACF expects the additional information to add an estimated eight burden hours to each Indian Tribe's submission. This is reflected in the annual burden estimates shown below.

*Respondents:* Indian Tribes applying to operate a TANF program.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Request for State Data Needed to Determine the Amount of a Tribal Family Assistance Grant .....	20	1	68	1,360

*Estimated Total Annual Burden Hours:* 1,360.

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comments and recommendations for the proposed information collection should be sent directly to the following:

Office of Management and Budget, Paperwork Reduction Project, Fax: 202-395-6974, Attn: Desk Officer for the Administration for Children and Families.

Dated: October 30, 2007.

**Robert Sargis,**

*Reports Clearance Officer.*

[FR Doc. 07-5494 Filed 11-5-07; 8:45 am]

**BILLING CODE 4184-01-M**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

**Proposed Information Collection Activity; Comment Request**

*Proposed Projects:*

*Title:* Project 1099.

*OMB No.:* 0970-0183.

*Description:* A voluntary program which provides State Child Support Enforcement agencies, upon their request, access to the earned and unearned income information reported to IRS by employers and financial institutions. The IRS 1099 information is used to locate noncustodial parents and to verify income and employment.

*Respondents:* State IV-D programs.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
1099 Record Specifications .....	54	12	1.96	1,270
IRS Safeguarding Certification Letter .....	54	1	.48	26

*Estimated Total Annual Burden Hours:* 1,296.

In compliance with the requirements of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Administration for Children and Families is soliciting public comment on the specific aspects of the information collection described above. Copies of the proposed collection of information can be obtained and comments may be forwarded by writing to the Administration for Children and Families, Office of Administration, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer. E-mail address: [infocollection@acf.hhs.gov](mailto:infocollection@acf.hhs.gov). All requests should be identified by the title of the information collection.

The Department specifically request comments on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) the quality, utility, and clarity of the

information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Consideration will be given to comments and suggestions submitted within 60 days of this publication.

Dated: October 30, 2007.  
**Robert Sargis,**  
*Reports Clearance Officer.*  
 [FR Doc. 07-5495 Filed 11-5-07; 8:45 am]  
**BILLING CODE 4184-01-M**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

**Submission for OMB Review; Comment Request**

*Title:* Low Income Home Energy Assistance Program (LIHEAP) Carryover and Reallotment Report.  
*OMB No.:* 0970-0106.  
*Description:* The LIHEAP statute and regulations require LIHEAP grantees to

report certain information to HHS concerning funds forwarded and funds subject to reallotment. The 1994 reauthorization of the LIHEAP statute, the Human Service Amendments of 1994 (Pub. L. 103-252), requires that the Carryover and Reallotment Report for one fiscal year be submitted to HHS by the grantee before the allotment for the next fiscal year may be awarded.

The Administration for Children and Families is requesting no changes in the collection of data with the Carryover and Reallotment Report for FY 2007, a form for the collection of data, and the Simplified Instructions for Timely Obligations of FY 2007 LIHEAP Funds and Reporting Funds for Carryover and Reallotment. The form clarifies the information being requested and ensures the submission of all the required information. The form facilitates our response to numerous queries each year concerning the amounts of obligated funds. Use of the form is voluntary. Grantees have the option to use another format.

*Respondents:* State Governments, Tribal Governments, Insular Areas, the District of Columbia, and the Commonwealth of Puerto Rico.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Carryover and Reallotment .....	192	1	3	576

*Estimated Total Annual Burden Hours:* 576.

*Additional Information:* Copies of the proposed collection may be obtained by writing to the Administration for Children and Families, Office of Administration, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer. All requests should be identified by the title of the information collection. E-mail address: [infocollection@acf.hhs.gov](mailto:infocollection@acf.hhs.gov).

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Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication. Written comments and recommendations for the proposed information collection should be sent directly to the following:

Office of Management and Budget, Paperwork Reduction Project, Fax: 202-395-6974, Attn: Desk Officer for the Administration for Children and Families.

Dated: October 30, 2007.  
**Robert Sargis,**  
*Reports Clearance Officer.*  
 [FR Doc. 07-5496 Filed 11-5-07; 8:45 am]  
**BILLING CODE 4184-01-M**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

**Submission for OMB Review; Comment Request**

*Title:* National Medical Support Notice.  
*OMB No.:* 0970-0222.

*Description:* The information collected by State IV-D Child Support Enforcement agencies is used to complete the National Medical Support Notice (NMSN), which is sent to employers of employee/obligors and used as a means of enforcing the health