

weekly if the sum of their total transaction accounts, savings deposits, and small time deposits is equal to or greater than the nonexempt deposit cutoff and quarterly if the sum of their total transaction accounts, savings deposits, and small time deposits is less than the nonexempt deposit cutoff. U.S. branches and agencies of foreign banks and banking Edge and agreement corporations are required to submit FR 2900 data weekly regardless of their deposit size. These mandatory data are used by the Federal Reserve for administering Regulation D (Reserve Requirements of Depository Institutions) and for constructing, analyzing, and monitoring the monetary and reserve aggregates.

Current actions: The Federal Reserve proposes to: (1) Replace the term "operations subsidiary" with "majority-owned subsidiary" in the FR 2900 reporting instructions and (2) incorporate the proposed amendments to Regulation D into the FR 2900 reporting instructions. In addition, the Federal Reserve proposes to reorganize and reformat the FR 2900 reporting instructions to enhance their clarity.

4. *Report title:* The Annual Report of Deposits and Reservable Liabilities.

Agency form number: FR 2910a.

OMB control number: 7100-0175.

Frequency: Annually.

Reporters: Depository institutions.

Annual reporting hours: 3,659 hours.

Estimated average hours per response: 0.75 hours.

Number of respondents: 4,878.

General description of report: This information collection is mandatory (12 U.S.C. 248(a) and 461) and is given confidential treatment (5 U.S.C. 552(b)(4)).

Abstract: Currently, the three-item FR 2910a is generally filed by exempt institutions whose net transaction accounts are less than or equal to the exemption amount and whose sum of total transaction accounts, savings deposits, and small time deposits is less than the reduced reporting limit but total deposits are greater than the exemption amount. Respondents submit single-day data as of June 30. These mandatory data are used by the Federal Reserve for administering Regulation D (Reserve Requirements of Depository Institutions) and for constructing, analyzing, and monitoring the monetary and reserve aggregates.

Current actions: The Federal Reserve proposes to: (1) Replace the term "operations subsidiary" with "majority-owned subsidiary" in the FR 2910a reporting instructions and (2) incorporate the proposed amendments to Regulation D into the FR 2910a

reporting instructions. In addition, the Federal Reserve proposes to reorganize and reformat the FR 2910a reporting instructions to enhance their clarity.

Board of Governors of the Federal Reserve System.

Dated: July 29, 2008.

Jennifer J. Johnson,

Secretary of the Board.

[FR Doc. E8-17716 Filed 8-1-08; 8:45 am]

BILLING CODE 6210-01-P

FEDERAL RESERVE SYSTEM

Formations of, Acquisitions by, and Mergers of Bank Holding Companies

The companies listed in this notice have applied to the Board for approval, pursuant to the Bank Holding Company Act of 1956 (12 U.S.C. 1841 *et seq.*) (BHC Act), Regulation Y (12 CFR Part 225), and all other applicable statutes and regulations to become a bank holding company and/or to acquire the assets or the ownership of, control of, or the power to vote shares of a bank or bank holding company and all of the banks and nonbanking companies owned by the bank holding company, including the companies listed below.

The applications listed below, as well as other related filings required by the Board, are available for immediate inspection at the Federal Reserve Bank indicated. The applications also will be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing on the standards enumerated in the BHC Act (12 U.S.C. 1842(c)). If the proposal also involves the acquisition of a nonbanking company, the review also includes whether the acquisition of the nonbanking company complies with the standards in section 4 of the BHC Act (12 U.S.C. 1843). Unless otherwise noted, nonbanking activities will be conducted throughout the United States. Additional information on all bank holding companies may be obtained from the National Information Center website at www.ffiec.gov/nic/.

Unless otherwise noted, comments regarding each of these applications must be received at the Reserve Bank indicated or the offices of the Board of Governors not later than August 29, 2008.

A. Federal Reserve Bank of Boston (Richard Walker, Community Affairs Officer) P.O. Box 55882, Boston, Massachusetts 02106-2204:

1. *Campello Bancorp, Inc.*, Brockton, Massachusetts, to become a bank holding company by acquiring 100 percent of the voting shares of The Community Bank, a Massachusetts Co-

operative Bank, Brockton, Massachusetts, in connection with the conversion of Campello Bancorp, Brockton, Massachusetts, from mutual to stock form.

In connection with this application, the applicant also has applied to acquire Cody Services Corporation, Brockton, Massachusetts, and thereby engage in loan servicing activities, pursuant to section 225.28(b)(1) of Regulation Y.

B. Federal Reserve Bank of Atlanta (Steve Foley, Vice President) 1000 Peachtree Street, N.E., Atlanta, Georgia 30309:

1. *Whitney Holding Corporation*, New Orleans, Louisiana, to merge with Parish National Corporation, Covington, Louisiana, and thereby indirectly acquire Parish National Bank, Bogalusa, Louisiana.

Board of Governors of the Federal Reserve System, July 30, 2008.

Robert deV. Frierson,

Deputy Secretary of the Board.

[FR Doc. E8-17801 Filed 8-1-08; 8:45 am]

BILLING CODE 6210-01-S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day-08-08BK]

Proposed Data Collections Submitted for Public Comment and Recommendations

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 Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call 404-639-5960 or send comments to Maryam I. Daneshvar, CDC Acting Reports Clearance Officer, 1600 Clifton Road, MS-D74, Atlanta, GA 30333 or send an e-mail to omb@cdc.gov.

Comments are invited 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) ways to enhance 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. Written comments should be received within 60 days of this notice.

Proposed Project

Exploratory Research with People Living with Lung Cancer—New—Division of Cancer Prevention and Control, National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Lung cancer is the most common cancer and leading cause of cancer related mortality in the world. Each year, over 150,000 Americans are diagnosed with lung cancer and a similar number die from the disease. Due to the relatively low survival rate for individuals with lung cancer (the

five-year survival rate of all patients with lung cancer is only 15%), the needs of individuals affected by lung cancer have received less attention in health care research than the needs of individuals with other types of cancer, resulting in a gap in knowledge about a significant number of people living with the diagnosis of lung cancer.

CDC proposes to conduct formative research to improve understanding of the challenges and needs of individuals living with lung cancer. Because smoking is one of the primary risk factors for lung cancer, the research will include respondents with different types of smoking history in order to explore the influence of smoking status on individual experience with cancer diagnosis, stigma and discrimination, and counseling and support services. For example, individuals who have never smoked may face challenges in obtaining an initial diagnosis of lung cancer, while current or former smokers may feel subject to judgments or blame

from others, including medical providers as well as family and friends.

Information will be collected during in-depth interviews (IDIs) with 27 respondents between the ages of 30 and 80 who have been diagnosed with lung cancer. Three different types of respondents will be recruited from partnering clinical practices in two U.S. cities: Individuals who are Smokers (9), individuals who are Former Smokers (9), and individuals who Never Smoked (9). Each telephone interview will last approximately one hour.

The results of this exploratory research project will inform future research activities and the development of health-related information and services for the benefit of individuals living with lung cancer. Project goals support the goals for cancer and communication described in Healthy People 2010.

There are no costs to respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden (in hours)
People Living with Lung Cancer	Contact Form	108	1	5/60	9
	Screening Form	81	1	10/60	14
	In-depth Interview Guide	27	1	1	27
Total	50

Marilyn S. Radke,
Reports Clearance Officer, Centers for Disease Control and Prevention.
 [FR Doc. E8-17767 Filed 8-1-08; 8:45 am]
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60 Day-08-07BF]

Proposed Data Collections Submitted for Public Comment and Recommendations

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 Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and

instruments, call 404-639-5960 or send comments to Maryam Daneshvar, CDC Acting Reports Clearance Officer, 1600 Clifton Road, MS-D74, Atlanta, GA 30333 or send an e-mail to omb@cdc.gov.

Comments are invited 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) ways to enhance 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. Written comments should be received within 60 days of this notice.

Proposed Project

Formative Research on Lung Cancer Screening—New—Division of Cancer Prevention and Control, National Center

for Chronic Disease Prevention and Health Promotion, Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Currently, there is scientific debate about the value of lung cancer screening. For people in whom lung cancer is found and treated at an early, localized stage, the five-year survival rate is roughly 49%. However, only 16% of people with lung cancer are diagnosed at this early, localized stage. Screening for lung cancer using chest x-rays (CXR) was widely practiced, but studies have shown that CXR with or without sputum cytology does not reduce mortality from lung cancer. Studies are currently underway to provide more information about the effectiveness of other types of screening tests, such as computed tomography (CT) scans and spiral CT scans.

The purpose of this project is to conduct formative research to gather information from adult health care consumers and primary care physicians about experiences and practices related to lung cancer screening and testing as