Board of Governors of the Federal Reserve System, August 11, 2008.

Robert deV. Frierson,

Deputy Secretary of the Board.

[FR Doc. E8–18828 Filed 8–13–08; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Meeting of the President's Council on Bioethics

AGENCY: Department of Health and Human Services, Office of Public Health and Science, The President's Council on Bioethics.

ACTION: Notice.

SUMMARY: The President's Council on Bioethics (Edmund D. Pellegrino, MD, Chairman) will hold its thirty-fourth meeting, at which it will discuss its projected white paper on ethical questions in medical care reform as well as hear and discuss presentations on two additional topics, i.e., exercises of conscience in the practice of the health professions and futility in clinical judgments at the end of life. Subjects discussed at past Council meetings (although not on the agenda for the September 2008 meeting) include: Therapeutic and reproductive cloning, assisted reproduction, reproductive genetics, neuroscience, aging retardation, organ transplantation, personalized medicine, and lifespan-extension. Publications issued by the Council to date include: *Human Cloning and Human Dignity: An Ethical Inquiry* (July 2002); *Beyond Therapy: Biotechnology and the Pursuit of Happiness* (October 2003); *Being Human: Readings from the President's Council on Bioethics* (December 2003); *Monitoring Stem Cell Research* (January 2004), *Reproduction and Responsibility: The Regulation of New Biotechnologies* (March 2004), *Alternative Sources of Human Pluripotent Stem Cells: A White Paper* (May 2005), *Taking Care: Ethical Caregiving in Our Aging Society* (September 2005), and *Human Dignity and Bioethics: Essays Commissioned by the President's Council on Bioethics* (March 2008). Reports are forthcoming on three topics: Controversies in the determination of death; organ donation, procurement, allocation, and transplantation; and newborn screening.

DATES: The meeting will take place Thursday, September 11, 2008, from 9 a.m. to 5 p.m., ET; and Friday, September 12, 2008, from 9 a.m. to noon, ET.

ADDRESSES: Hotel Palomar Arlington, 1121 North 19th Street, Arlington, VA 22209. Phone 703–351–9170.

FOR FURTHER INFORMATION CONTACT: Ms. Diane M. Gianelli, Director of Communications, The President's Council on Bioethics, 1425 New York Avenue, NW., Suite C100, Washington, DC 20005. Telephone: 202/296–4669. E-mail: *info@bioethics.gov.* Web site: *http://www.bioethics.gov.*

SUPPLEMENTARY INFORMATION: The meeting agenda will be posted at *http://www.bioethics.gov.* The Council encourages public input, either in person or in writing. At this meeting, interested members of the public may address the Council, beginning at 11:45 a.m. on Friday, September 12. Comments are limited to no more than five minutes per speaker or organization. As a courtesy, please inform Ms. Diane M. Gianelli, Director of Communications, in advance of your intention to make a public statement, and give your name and affiliation. To submit a written statement, mail or e-mail it to Ms. Gianelli at one of her contact addresses given above.

Dated: August 4, 2008.

F. Daniel Davis,

Executive Director, The President's Council on Bioethics.

[FR Doc. E8–18830 Filed 8–13–08; 8:45 am]

BILLING CODE 4154–06–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–08–08AJ]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call the CDC Reports Clearance Officer at (404) 639–4766 or send an e-mail to *omb@cdc.gov.* Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395–6974. Written comments should be received within 30 days of this notice.

Proposed Project

Focus Group Testing to Effectively Plan and Tailor Cancer Prevention and Control Communication Campaigns—New—Division of Cancer Prevention and Control (DCPC), National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The mission of CDC's Division of Cancer Prevention and Control (DCPC) is to reduce the burden of cancer in the United States through cancer prevention, reduction of risk, early detection, better treatment, and improved quality of life for cancer survivors. Toward this end, DCPC supports the scientific development, implementation, and evaluation of various health communication campaigns with an emphasis on specific cancer burdens. This process requires testing of messages, concepts, and materials prior to their final development and dissemination.

CDC requests OMB approval of a generic information collection request to develop and test cancer prevention and control messages, including, but not limited to, colorectal and gynecologic cancers. Because communication campaigns will vary according to the type of cancer, qualitative dimensions of the message, and the type of respondents, DCPC has developed a reference set of questions that can be tailored for use in a variety of focus group-based information collections. The discussion guide for each focus group will be drawn from the reference set of pre-approved questions.

Insights gained from the focus groups will assist in the development and/or refinement of messages and materials to ensure that the general public and other key audiences clearly understand the messages and are motivated to adopt the desired action. Screening information will be collected from potential respondents in order to identify those who represent key audiences for specific messages.

The average burden for participating in a focus group discussion will be two hours. Over a three-year period, DCPC will conduct or sponsor up to 72 focus groups per year with an average of 12 respondents each. There are no costs to respondents except their time. The total estimated annualized burden hours are 1,814.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
General Public	Screening Form	1,382	1	3/60
	Focus Group Guide	691	1	2
Health Care Providers	Screening Form	346	1	3/60
	Focus Group Guide	173	1	2

Dated: August 5, 2008.

Maryam I. Daneshvar,

Acting Reports Clearance Officer, Centers for Disease Control and Prevention.

[FR Doc. E8–18817 Filed 8–13–08; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60 Day–08–0006]

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. Alternatively, to obtain a copy of the data collection plans and instrument, call 404–639–5960 and send comments to Maryam I. Daneshvar, CDC Reports Clearance Officer, 1600 Clifton Road NE., MS-D74, Atlanta, Georgia 30333; comments may also be sent by 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 a 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 clarify 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 information technology. Written comments should be received within 60 days of this notice.

Proposed Project

Statements in Support of Application of Waiver of Inadmissibility (0920–0006)—Extension—National Center for Preparedness, Detection, and Control of Infectious Diseases (NCPDCID), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Section 212(a)(1) of the Immigration and Nationality Act states that aliens with specific health related conditions are ineligible for admission into the United States. The Attorney General may waive application of this inadmissibility on health-related grounds if an application for waiver is filed and approved by the consular office considering the application for visa. CDC uses this application primarily to collect information to establish and maintain records of waiver applicants in order to notify the U.S. Citizenship and Immigration Services when terms, conditions and controls imposed by waiver are not met. CDC is requesting approval from OMB to collect this data for another 3 years. There are no costs to respondents except their time to complete the application. The annualized burden for this data collection is 167 hours.

ESTIMATE OF ANNUALIZED BURDEN HOURS

Form	Number of responses	Number of responses per respondent	Average burden per response (in hours)	Total burden (in hours)
Form CDC 4.422–1	200	1	10/60	33
Form CDC 4.422–1a	200	1	20/60	67
Form CDC 4.422–1b	200	1	20/60	67
Total				167

Dated: August 5, 2008.

Maryam I. Daneshvar,

Acting Reports Clearance Officer, Centers for Disease Control and Prevention.

[FR Doc. E8–18819 Filed 8–13–08; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–08–08BA]

Agency Forms Undergoing Paperwork Reduction Act Review

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