| ORIGINAL THRESHOLD | ADJUSTED THRESHOLD |  |  |
|--------------------|--------------------|--|--|
| \$200 million      | \$260.7 million    |  |  |
| \$500 million      | \$651.7 million    |  |  |
| \$1 billion        | \$1,303.4 million  |  |  |

#### EFFECTIVE DATE: February 12, 2009.

**FOR FURTHER INFORMATION CONTACT:** B. Michael Verne, Bureau of Competition, Premerger Notification Office (202) 326-3100.

Authority: 16 U.S.C. § 7A.

By direction of the Commission.

## Donald S. Clark,

Secretary. [FR Doc. E9–411 Filed 1–12–09; 8:45 am] BILLING CODE 6750-11-S

# FEDERAL TRADE COMMISSION

# Revised Jurisdictional Thresholds for Section 8 of the Clayton Act

AGENCY: Federal Trade Commission.

# ACTION: Notice.

**SUMMARY:** The Federal Trade Commission announces the revised thresholds for interlocking directorates required by the 1990 amendment of Section 8 of the Clayton Act. Section 8 prohibits, with certain exceptions, one person from serving as a director or officer of two competing corporations if two thresholds are met. Competitor corporations are covered by Section 8 if each one has capital, surplus, and undivided profits aggregating more than \$10,000,000, with the exception that no corporation is covered if the competitive sales of either corporation are less than \$1,000,000. Section 8(a)(5) requires the Federal Trade Commission to revise those thresholds annually, based on the change in gross national product. The new thresholds, which take effect immediately, are \$26,161,000 for Section 8(a)(1), and \$2,616,100 for Section 8(a)(2)(A).

EFFECTIVE DATE: January 13, 2009.

### FOR FURTHER INFORMATION CONTACT:

James F. Mongoven, Bureau of Competition, Office of Policy and Coordination, (202) 326-2879.

Authority: 15 U.S.C. § 19(a)(5).

By direction of the Commission.

# Donald S. Clark,

Secretary.

[FR Doc. E9-418 Filed 1-12-09; 8:45 am] BILLING CODE 6750-01-S

## GENERAL SERVICES ADMINISTRATION

## Federal Travel Regulation (FTR); Notice of GSA Bulletin FTR 09–02

**AGENCY:** Office of Governmentwide Policy, General Services Administration (GSA).

**ACTION:** Notice of a bulletin.

**SUMMARY:** This Bulletin informs agencies what baggage and seat choice fees they may reimburse their employees while on official travel. GSA Bulletin FTR 09–02 may be found at *http://www.gsa.gov/bulletin.* 

**DATES:** The bulletin announced in this notice became effective on December 31, 2008, and will remain effective until the FTR is amended to reflect the changes.

**FOR FURTHER INFORMATION CONTACT:** For clarification of content, please contact Mr. Cy Greenidge, Office of Governmentwide Policy, Office of Travel, Transportation and Asset Management, at (202) 219–2349.

Please cite FTR Bulletin 09–02.

# SUPPLEMENTARY INFORMATION:

#### A. Background

Section 301–10.122 of the Federal Travel Regulation (FTR) (41 CFR 301– 10.122) stipulates that Federal employees, with few exceptions, must use coach-class accommodations. As a result of many airlines now charging additional fees for checked baggage, as well as for seat choice in the coach-class cabin, this bulletin was developed to clarify which of these fees may be reimbursed by Federal agencies.

#### **B.** Procedures

Bulletins regarding the Federal Travel Regulation are located on the Internet at *http://www.gsa.gov/bulletin* as Federal Travel Regulation bulletins.

Dated: January 5, 2009.

#### Russell H. Pentz,

Assistant Deputy Associate Administrator, Office of Travel, Transportation, and Asset Management.

[FR Doc. E9-434 Filed 1-12-09; 8:45 am] BILLING CODE 6820-14-P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Centers for Disease Control and Prevention

[60 Day-09-0556]

### 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 and 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**

Assisted Reproductive Technology (ART) Program Reporting System— Revision—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

# Background and Brief Description

Section 2(a) of Pub. L. 102–493 (known as the Fertility Clinic Success Rate and Certification Act of 1992 (FCSRCA), 42 U.S.C. 263a–1(a)) requires that each assisted reproductive technology (ART) program shall annually report to the Secretary through the Centers for Disease Control and Prevention: (1) Pregnancy success rates achieved by such ART program, and (2) the identity of each embryo laboratory used by such ART program and whether the laboratory is certified or has applied for such certification under the Act. The required information is currently reported by ART programs to CDC as specified in the Assisted Reproductive Technology (ART) Program Reporting System (OMB No. 0920–0556, exp. 9/ 30/2009). CDC seeks to extend OMB approval for a period of three years and incorporate a minor change in wording to one question. In addition, the revised total burden estimate includes an anticipated increase in the number of respondents and a slight decrease in the average number of responses per respondent. The burden estimate per response has also been revised to

include an adjustment for data validation procedures.

The currently approved program reporting system, also known as the National ART Surveillance System (NASS), includes information about all ART cycles initiated by any of the ART programs in the United States. An ART cycle is considered to begin when a woman begins taking ovarian stimulatory drugs or starts ovarian monitoring with the intent of having embryos transferred. The system also collects information about the pregnancy outcome of each cycle, as well as a number of data items deemed important to explain variability in success rates across ART programs and across individuals. Data elements and definitions currently in use reflect CDC's consultations with representatives of the Society for Assisted Reproductive Technology (SART), the American Society for Reproductive Medicine, and RESOLVE, the National Infertility Association (a

national, nonprofit consumer organization), as well as a variety of individuals with expertise and interest in this field.

Respondents are the 480 ART programs in the United States. Approximately 420 clinics are expected to report an average of 286 ART cycles each. Ten percent of responding clinics will be randomly selected to participate in full validation of selected ART cycle records and an abbreviated validation of selected cycles resulting in live birth. All information is collected electronically. Respondents have the option of entering data directly into a Web-based NASS interface or of transmitting system-compatible files extracted from other record systems. The ART program reporting system allows CDC to publish an annual report to Congress as specified by the FCSRCA and to provide information needed by consumers.

There are no costs to respondents other than their time.

#### ESTIMATED ANNUALIZED BURDEN HOURS

| Respondents  | Form name | Number of respondents | Number of<br>responses per<br>respondent | Average burden<br>per response<br>(in hours) | Total burden<br>(in hours) |
|--------------|-----------|-----------------------|--|--|----------------------------|
| ART Programs | NASS      | 420                   | 286                                      | 38/60  | 76,076                     |

Dated: January 2, 2009.

# Maryam I. Daneshvar,

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

[FR Doc. E9–405 Filed 1–12–09; 8:45 am] BILLING CODE 4163–18–P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Centers for Disease Control and Prevention

## Subcommittee on Procedures Reviews, Advisory Board on Radiation and Worker Health (ABRWH), National Institute for Occupational Safety and Health (NIOSH)

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

aforementioned subcommittee:

*Time and Date:* 9:30 a.m.–5 p.m., January 28, 2009.

*Place:* Cincinnati Airport Marriott, 2395 Progress Drive, Hebron, Kentucky 41018. Telephone (859) 334–4611, Fax (859) 334– 4619.

*Status:* Open to the public, but without a public comment period. To access by

conference call dial the following information 1(866) 659–0537, Participant Pass Code 9933701.

Background: The Advisory Board was established under the Energy Employees Occupational Illness Compensation Program Act of 2000 to advise the President on a variety of policy and technical functions required to implement and effectively manage the new compensation program. Key functions of the Advisory Board include providing advice on the development of probability of causation guidelines that have been promulgated by the Department of Health and Human Services (HHS) as a final rule; advice on methods of dose reconstruction which have also been promulgated by HHS as a final rule; advice on the scientific validity and quality of dose estimation and reconstruction efforts being performed for purposes of the compensation program; and advice on petitions to add classes of workers to the Special Exposure Cohort (SEC).

In December 2000, the President delegated responsibility for funding, staffing, and operating the Advisory Board to HHS, which subsequently delegated this authority to CDC. NIOSH implements this responsibility for CDC. The charter was issued on August 3, 2001, renewed at appropriate intervals, and will expire on August 3, 2009.

*Purpose:* The Advisory Board is charged with (a) Providing advice to the Secretary, HHS, on the development of guidelines under Executive Order 13179; (b) providing advice to the Secretary, HHS, on the

scientific validity and quality of dose reconstruction efforts performed for this program; and (c) upon request by the Secretary, HHS, advise the Secretary on whether there is a class of employees at any Department of Energy facility who were exposed to radiation but for whom it is not feasible to estimate their radiation dose, and on whether there is reasonable likelihood that such radiation doses may have endangered the health of members of this class. The Subcommittee on Procedures Reviews was established to aid the Advisory Board in carrying out its duty to advise the Secretary, HHS, on dose reconstruction. It will be responsible for overseeing, tracking, and participating in the reviews of all procedures used in the dose reconstruction process by the NIOSH Office of Compensation Analysis and Support (OCAS) and its dose reconstruction contractor.

Matters To Be Discussed: The agenda for the Subcommittee meeting includes: a discussion of proposed new versions of the computer-assisted telephone interview scripts and procedures NIOSH uses to interview claimants at the outset of the dose reconstruction process; a discussion of ORAUT-OTIB-0054 ("Fission and Activation Product Assignment for Internal Dose-Related Gross Beta and Gross Gamma Analyses") and ORAUT-OTIB-0066 ("Calculation of Dose from Intakes of Special Tritium Compounds"); and, a continuation of the comment-resolution process for other dose reconstruction procedures under review by the Subcommittee.