Bankshares of Fayetteville, Inc., Fayetteville, Arkansas, and thereby indirectly acquire Bank of Fayetteville, Fayetteville, Arkansas.

Board of Governors of the Federal Reserve System, September 1, 2010.

Robert deV. Frierson,

Deputy Secretary of the Board.

[FR Doc. 2010–22156 Filed 9–3–10; 8:45 am]

BILLING CODE 6210–01–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Proposed Collection: Comment Request

In compliance with the requirement for opportunity for public comment on proposed data collection projects (section 3506(c)(2)(A) of Title 44, United States Code, as amended by the Paperwork Reduction Act of 1995, Pub. L. 104–13), the Health Resources and Services Administration (HRSA) publishes periodic summaries of proposed projects being developed for submission to the Office of Management and Budget (OMB) under the Paperwork Reduction Act of 1995. To request more information on the proposed project or to obtain a copy of the data collection plans and draft instruments, e-mail *paperwork@hrsa.gov* or call the HRSA Reports Clearance Officer at (301) 443–1129.

Comments are invited on: (a) The proposed collection of information for the proper performance of the functions of the agency; (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.

Proposed Project: National Health Service Corps Information Follow-up Form—[New]

The National Health Service Corps (NHSC) of the Bureau of Clinician Recruitment and Service, HRSA, is committed to improving the health of the Nation's underserved by uniting communities in need with caring health professionals and by supporting communities' efforts to build better systems of care.

The NHSC Information Follow-up Form, which NHSC will use when exhibiting at national and regional conferences as well as when presenting on campuses to health profession students, is an optional form that a health profession student, licensed clinician, faculty member, or clinical site administrator can fill out. Individuals who submit the form to NHSC, may ask questions and/or sign up to receive periodic program updates and other general information regarding opportunities with the NHSC via e-mail. An individual is free to discontinue receiving communication from NHSC at anytime by e-mailing *NHSCupdate@hrsa.gov*. Completed forms will contain information such as, the names of the individuals, their e-mail address(es), their city and State, their phone number, the organization where they are employed (or the school which they attend), the year they intend to graduate (if applicable), how they heard about NHSC, which NHSC programs they are interested in, *etc.* Assistance in completing the form will be given by the BCRS staff person (or BCRS representative) who is present at the event. Based on the FY10 exhibit and presentation schedule, NHSC could have gathered information from 2,400 individuals. Using this as a guide for future years, the estimated annual burden is as follows:

Form	Number of respondents	Responses per respondent	Total responses	Hours per response	Total burden hours
Information Follow-up Form	2,400	1	2,400	.025 (90 seconds)	60
Total	2,400	1	2,400	.025 (90 seconds)	60

E-mail comments to *paperwork@hrsa.gov* or mail the HRSA Reports Clearance Officer, Room 10–33, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. Written comments should be received within 60 days of this notice.

Dated: September 1, 2010.

Sahira Rafiullah,

Director, Division of Policy and Information Coordination.

[FR Doc. 2010–22233 Filed 9–3–10; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

[OMB No.: 0970–0376]

Submission for OMB Review; Comment Request

Title: Strengthening Communities Fund Program Evaluation.

Description: This proposed information collection activity is to obtain evaluation information from Strengthening Communities Fund (SCF) grantees. Grantees include participants in two SCF grant programs contributing to the economic recovery as authorized in the American Recovery and Reinvestment Act of 2009 (ARRA). The SCF evaluation is an important opportunity to examine the outcomes achieved by the Strengthening Communities Fund in meeting its objective of improving the capacity of grantees that include Nonprofit organizations and State, Local and Tribal Governments. The evaluation for each program will be designed to assess progress and measure increased organizational capacity of grantees is each of the two SCF programs. The purpose of this request will be to establish the approved baseline instruments for follow-up data collection.

Respondents: SCF Grantees (both the Nonprofit Capacity Building Program and the Government Capacity Building Program) made up of state, local, and Tribal governments, as well as nonprofit organizations.

Annual Burden Estimates

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Nonprofit Capacity Building Program Performance Progress Report (PPR)	35	4	1	140
Government Capacity Building Program PPR	49	4	1	196

Estimated Total Annual Burden Hours: 336.

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.*

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, *Fax:* 202–395–7285, *E-mail: OIRA_SUBMISSION@OMB.EOP.GOV. Attn:* Desk Officer for the Administration for Children and Families.

Dated: August 31, 2010.

Robert Sargis,

Reports Clearance Officer.

[FR Doc. 2010–22132 Filed 9–3–10; 8:45 am]

BILLING CODE 4184–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. FDA–2010–N–0436]

Center for Biologics Evaluation and Research eSubmitter Pilot Evaluation Program for Blood Establishments That Collect Whole Blood and Blood Components

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA), Center for Biologics Evaluation and Research (CBER) is announcing an invitation to participate in a pilot evaluation program for CBER's eSubmitter Program (eSubmitter). CBER's eSubmitter has been customized as an automated biologics license application (BLA) and BLA supplement (BLS) submission system for blood and blood components. Participation in the pilot program is open to blood establishments that collect Whole Blood and blood components. The pilot program is intended to provide industry and CBER regulatory review staff the opportunity to evaluate the eSubmitter system and determine if it facilitates the BLA/BLS submission process. The purpose of this notice is to invite blood establishments that collect Whole Blood and blood components to submit a request to CBER if they are interested in participating in this pilot program.

DATES: Submit a written or electronic request for participation in this program by October 7, 2010.

ADDRESSES: If you are interested in participating in this program, you should submit a request to participate in the program to the Division of Dockets Management (HFA–305), Food and Drug Administration, 5630 Fishers Lane, rm. 1061, Rockville, MD 20852. Submit electronic requests to *http://www.regulations.gov*.

FOR FURTHER INFORMATION CONTACT: Lore Fields, Center for Biologics Evaluation and Research (HFM–375), Food and Drug Administration, 1401 Rockville Pike, suite 200N, Rockville, MD 20852–1448, 301–827–6143, FAX: 301–827–3534, email: *lore.fields@fda.hhs.gov*.

SUPPLEMENTARY INFORMATION:

I. Background

CBER regulates certain biological products, including blood and blood products, and is committed to advancing the public health through innovative activities that help ensure the safety, effectiveness and timely delivery of these products to patients. Further, CBER seeks to continuously enhance and update review efficiency and quality, and the quality of its regulatory efforts and interactions, by providing CBER staff and industry with improved processes. In support of this goal, CBER has participated in the FDA development of a computer-assisted automated BLA/BLS submission program called eSubmitter to improve the process for providing certain regulatory submissions to FDA. eSubmitter will include programs to submit applications for licensure, supplements to an approved license, and amendments to pending applications or supplements.

II. The eSubmitter Pilot Evaluation Program Expectations

The eSubmitter pilot evaluation program is expected to last approximately 12 months. During this period of time, participants will complete BLA/BLS regulatory submissions using the eSubmitter template developed at CBER for use by blood establishments that collect Whole Blood and blood components. eSubmitter was developed using the same review criteria for applications for these products as currently used in the BLA/BLS review process at CBER. During the BLA/BLS submission process, the participants will enter the requested information into the eSubmitter tool and attach requested documents as an Adobe document (pdf format). This information will be saved onto a CD–ROM and mailed to CBER for review. Paper copies of submissions will not be required. CBER will review the information provided on the CD–ROM and the attachments according to current managed review procedures.

During the BLA/BLS submission process, CBER staff will be available to answer any questions or concerns that may arise. As each submission is completed, the users will be asked to comment on the eSubmitter program. These discussions will assist CBER in the final development and release of this electronic tool for use by industry.

III. Requests for Participation

Requests to participate in the eSubmitter pilot are to be identified with the docket number found in brackets in the heading of this document. You should include the following information in your request: Contact name, contact phone number, email address, name of the establishment, address, and license number. Once requests for participation are received, FDA will contact interested establishments to discuss the pilot program.