

identify the strengths and weaknesses of the NPIN Web site, and other products and services. This process also ensures collecting data using a consistent format and complies with requirements under the Public Health Service Act, Executive Order 12862, and GPRA. Ultimately, the data collected will enable the NPIN team to provide the highest quality products and services to NPIN users.

Without this information collection, CDC will be hampered in successfully carrying out its mission of providing quality products and services to populations served. Failure to continue with the data collection effort would compromise efforts to meet the legislative requirement of being as responsive as possible to the public who consistently seek information about the

prevention and treatment of HIV/AIDS, STDS, TB, and viral hepatitis. Moreover, it would diminish NPIN's value to the public in terms of usability and credibility as a comprehensive Federal information and education resource. There is no cost to respondents other than their time.

**ESTIMATED ANNUALIZED BURDEN HOURS**

Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden (in hours)
NPIN Web site User Survey .....	500	1	15/60	125
Online NPIN Products and Services User Survey .....	475	2	13/60	206
NPIN Products and Services, Phone User Survey .....	25	2	13/60	11
<b>Total .....</b>	<b>1000</b>	<b>5</b>	<b>.....</b>	<b>342</b>

Dated: October 18, 2010.  
**Carol Walker,**  
*Acting Reports Clearance Officer, Centers for Disease Control and Prevention.*  
 [FR Doc. 2010-26696 Filed 10-21-10; 8:45 am]  
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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

**Submission for OMB Review; Comment Request**

*Title:* Notice of Interstate Lien.  
*OMB No.:* 0970-0153.  
*Description:* Section 452(a)(11) of the Social Security Act requires the Secretary of Health and Human Services to promulgate a form for imposition of liens to be used by the State child support enforcement (Title IV-D)

agencies in interstate cases. Section 454(9)(E) of the Social Security Act requires each State to cooperate with any other State in using the Federal form for imposition of liens in interstate child support cases. Tribal IV-D agencies are not required to use this form but may choose to do so. OMB approval of this form is expiring in February 2011 and the Administration for Children and Families is requesting an extension of this form.

*Respondents:* State, local or Tribal agencies administering a child support enforcement program under title IV-D of the Social Security Act.

**ANNUAL BURDEN ESTIMATES**

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Notice of Lien .....	1,832,384	1	0.25	458,096

*Estimated Total Annual Burden Hours:* \$458,096.  
*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).  
*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](mailto:OIRA_SUBMISSION@OMB.EOP.GOV). Attn: Desk Officer for the Administration for Children and Families.

Dated: October 19, 2010.  
**Robert Sargis,**  
*Reports Clearance Officer.*  
 [FR Doc. 2010-26694 Filed 10-21-10; 8:45 am]  
**BILLING CODE 4184-01-P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Indian Health Service**

**Request for Public Comment: 30-Day Proposed Information Collection: Office of Urban Indian Health Programs; Uniform Data System**

**AGENCY:** Indian Health Service.  
**ACTION:** Notice.

**SUMMARY:** In compliance with Section 3507 of the Paperwork Reduction Act of 1995, which requires 30 days for public comment on proposed information collection projects, the Indian Health Service (IHS) has submitted to the Office of Management and Budget

(OMB) a request to review and approve the information collection listed below. This proposed information collection project was previously published in the **Federal Register** (74 FR 59544) on November 18, 2009 and allowed 60 days for public comment. No public comment was received in response to the notice. The purpose of this notice is to allow 30 days for public comment to be submitted directly to OMB.

**Proposed Collection:** Title: Office of Urban Indian Health Programs (OUIHP) Uniform Data System (UDS). **Type of Information Collection Request:** Initial request and four-year extension, for data collection to ensure compliance with legislative mandates and report to

Congress and policymakers on program accomplishments. **Form Number(s):** There are currently no form numbers. Reporting formats are contained in the UDS Instruction Manual. **Need and Use of Information Collection:** The UDS contains the annual reporting requirements for the cluster of primary health care and case management/ outreach and referral grantees funded by the IHS. The UDS includes reporting requirements for grantees of the OUIHP. The authorizing statute is Title V of Public Law 94-437, of the Indian Health Care Improvement Act, as amended. IHS will collect data in the UDS which will be used to ensure compliance with the

legislative mandates and report to Congress and policymakers on program accomplishments. To meet these objectives, the OUIHP requires a core set of data collected annually that is appropriate for monitoring and evaluating performance and reporting on annual trends. **Affected Public:** Title V funded urban Indian health programs. **Type of Respondents:** Title V urban Indian health programs.

The table below provides: Types of data collection instruments, Number of respondents, Responses per respondent, Total annual responses, Average burden hours per response, and Total annual burden hours.

Data collection instrument(s)	Number of respondents	Responses per respondent	Total annual responses	Average burden hours per response*	Total annual burden hours
Universal Report .....	34	1	34	8.00 (480 min)	272
American Indian/Alaska Native Report .....	34	1	34	8.00 (480 min)	272
<b>Total</b> .....	<b>68</b>				<b>544</b>

\* For ease of understanding, burden hours are also provided in actual minutes.

There are no Capital Costs, Operating Costs, and/or Maintenance Costs to report.

**Request for Comments:** Your written comments and/or suggestions are invited on one or more of the following points: (a) Whether the information collection activity is necessary to carry out an agency function; (b) whether the agency processes the information collected in a useful and timely fashion; (c) the accuracy of public burden estimate (the estimated amount of time needed for individual respondents to provide the requested information); (d) whether the methodology and assumptions used to determine the estimate are logical; (e) ways to enhance the quality, utility, and clarity of the information being collected; and (f) ways to minimize the public burden through the use of automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

**Direct Comments to OMB:** Send your written comments and suggestions regarding the proposed information collection contained in this notice, especially regarding the estimated public burden and associated response time to: Office of Management and Budget, Office of Regulatory Affairs, Attention: Desk Officer for IHS, New Executive Office Building, Room 10235, Washington, DC 20503.

**Send Comments and Requests for Further Information:** Send your written comments and requests for more information on the proposed collection or requests to obtain a copy of the data collection instrument(s) and instructions to: Mr. Hershel Gorham, Reports Clearance Officer, 801 Thompson Avenue, TMP, Suite 450, Rockville, MD 20852; call non-toll free (301) 443-4792; send via facsimile to (301) 443-9879; or send your e-mail requests, comments, and return address to: [hershel.gorham@ihs.gov](mailto:hershel.gorham@ihs.gov).

**Comment Due Date:** Your comments regarding this information collection are best assured of having full effect if received within 30 days of the date of this publication.

Dated: October 7, 2010.  
**Yvette Roubideaux,**  
 Director, Indian Health Service.  
 [FR Doc. 2010-26429 Filed 10-21-10; 8:45 am]  
**BILLING CODE 4165-16-M**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

**Submission for OMB Review; Comment Request**

**Title:** Interstate Administrative Subpoena.

**OMB No.:** 0970-0152.

**Description:** Section 452(a)(11) of the Social Security Act requires the Secretary of the Department of Health and Human Services to promulgate a form for administrative subpoenas to be used in State child support enforcement programs to collect information for use in the establishment, modification and enforcement of child support orders in interstate cases. Section 454(9)(E) of the Social Security Act requires each State to cooperate with any other State in using the Federal form for issuance of administrative subpoenas in interstate child support cases. Tribal IV-D agencies are not required to use this form but may choose to do so. OMB approval of this form is expiring in February 2011 and the Administration for Children and Families is requesting an extension of this form.

**Respondents:** State, local or Tribal agencies administering a child support enforcement program under title IV-D of the Social Security Act.