agenda will be announced at the beginning of the meeting.

Type of Meeting: The meeting will be open to the public, limited only by the space available on a first-come, firstserved basis. For security reasons, members of the public will be subject to security screening procedures and must present a valid photo identification to enter the building. The FDIC will provide attendees with auxiliary aids (e.g., sign language interpretation) required for this meeting. Those attendees needing such assistance should call (703) 562–6067 (Voice or TTY) at least two days before the meeting to make necessary arrangements. Written statements may be filed with the committee before or after the meeting. This Community Banking Advisory Committee meeting will be Web cast live via the Internet at http://www.vodium.com/goto/fdic/ communitybanking.asp. This service is free and available to anyone with the following systems requirements: http:// www.vodium.com/home/sysreq.html. Adobe Flash Player is required to view these presentations. The latest version of Adobe Flash Player can be downloaded at http://www.adobe.com/ shockwave/download/download.cgi?P1 Prod Version=ShockwaveFlash. Installation questions or troubleshooting help can be found at the same link. For optimal viewing, a high speed internet connection is recommended. The Community Banking meeting videos are made available on-demand approximately two weeks after the event.

Federal Deposit Insurance Corporation. Dated: May 16, 2012.

#### Robert E. Feldman,

Committee Management Officer. [FR Doc. 2012–12185 Filed 5–18–12; 8:45 am] BILLING CODE 6714–01–P

# FEDERAL DEPOSIT INSURANCE CORPORATION

#### Notice to All Interested Parties of the Termination of the Receivership of 10003, Douglass National Bank, Kansas City, MO

Notice is hereby given that the Federal Deposit Insurance Corporation ("FDIC") as Receiver for Douglass National Bank, ("the Receiver") intends to terminate its receivership for said institution. The FDIC was appointed receiver of Douglass National Bank on January 25, 2008. The liquidation of the receivership assets has been completed. To the extent permitted by available funds and in accordance with law, the Receiver will be making a final dividend payment to proven creditors.

Based upon the foregoing, the Receiver has determined that the continued existence of the receivership will serve no useful purpose. Consequently, notice is given that the receivership shall be terminated, to be effective no sooner than thirty days after the date of this Notice. If any person wishes to comment concerning the termination of the receivership, such comment must be made in writing and sent within thirty days of the date of this Notice to: Federal Deposit Insurance Corporation, Division of Resolutions and Receiverships, Attention: Receivership Oversight Department 8.1, 1601 Bryan Street, Dallas, TX 75201.

No comments concerning the termination of this receivership will be considered which are not sent within this time frame.

Federal Deposit Insurance Corporation.

Dated: May 15, 2012.

## Robert E. Feldman,

Executive Secretary. [FR Doc. 2012–12190 Filed 5–18–12; 8:45 am] BILLING CODE 6714–01–P

#### FEDERAL RESERVE SYSTEM

#### Change in Bank Control Notices; Acquisitions of Shares of a Bank or Bank Holding Company

The notificants listed below have applied under the Change in Bank Control Act (12 U.S.C. 1817(j)) and § 225.41 of the Board's Regulation Y (12 CFR 225.41) to acquire shares of a bank or bank holding company. The factors that are considered in acting on the notices are set forth in paragraph 7 of the Act (12 U.S.C. 1817(j)(7)).

The notices are available for immediate inspection at the Federal Reserve Bank indicated. The notices also will be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing to the Reserve Bank indicated for that notice or to the offices of the Board of Governors. Comments must be received not later than June 5, 2012.

A. Federal Reserve Bank of Chicago (Colette A. Fried, Assistant Vice President) 230 South LaSalle Street, Chicago, Illinois 60690–1414:

1. *Midred Stanley*, Searsboro, Iowa, as trustee of the Warren Stanley Trust; to retain voting shares of First State Bank Holding Company and thereby indirectly retain voting shares of First State Bank, both in Lynnville, Iowa. Board of Governors of the Federal Reserve System, May 16, 2012.

## Robert deV. Frierson,

Deputy Secretary of the Board. [FR Doc. 2012–12194 Filed 5–18–12; 8:45 am] BILLING CODE 6210–01–P

#### DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### Office of the Secretary

#### Office of the Assistant Secretary for Health, Statement of Organization, Functions, and Delegations of Authority

Part A, Office of the Secretary, statement of Organization, Function, and Delegation of Authority for the U.S. Department of Health and Human Services is being amended at Chapter AC, Office of the Assistant Secretary for Health (OASH), as last amended at 69 FR 660-661, dated January 6, 2004; 72 FR 58095-6, dated October 12, 2007; and most recently at 75 FR 53304-05, dated August 31, 2010. The amendment reflects the consolidation and realignment of personnel oversight, administration and management functions and responsibilities for the Office of the Assistant Secretary for Health's Immediate Office. The changes are as follows:

I. Under Chapter AC, Section AC.20 Functions, delete Paragraph A, "The Immediate Office (ACA)," in its entirety and replace with the following:

A. The Immediate Office (ACA) 75 FR 53304–05, Aug. 31, 2010

(1) Provides direction to program offices within OASH; (2) Provides oversight and direction to the Regional Health Administrators (I–X) and their associated staff; (3) Provides advice to assure that the Department conducts broad based public health assessments designed to better define public health challenges and to design solutions to those problems; assists other components within the Department in anticipating future public health issues and problems, and provides assistance to ensure that the Department designs and implements appropriate approaches, interventions, and evaluations, to maintain, sustain, and improve the health of the Nation; (4) At the direction of the Secretary, provides assistance in leading and managing the implementation and coordination of Secretarial decisions for Public Health Service (PHS) Operating Divisions (OPDIVs), and for that purpose, draws on Staff Divisions (STAFFDIVs) and other organizational units for assistance in regard to legislation, budget, communications, and policy analysis; (5) Provides advice to the Secretary and senior Department officials on budget and legislative issues of the PHS OPDIVs; (6) Works in conjunction with the Assistant Secretary for Planning and

Evaluation on matters of health science policy analysis and development; (7) Provides a focus for leadership on matters including recommendations for policy on population-based public health, science and public health infrastructure; and the Secretary's direction leads and/or coordinates initiatives that cut across agencies and OPDIVs; (8) Works in conjunction with the Department's PHS OPDIVs, and others, in building and promoting relationships among and between State and local health departments, academic institutions, professional and constituency organizations (9) Communicates and interacts with national and international professional and constituency organizations on matters of public health and science; (10) Manages the vaccine and immunization related activities for the Secretary; (11) Provides leadership and coordinates public health activities that addresses health disparities related to sexual orientation; (12) Responsible for management and oversight of human research subjects protections functions and related activities where research involves human subjects; (13) Proposes findings of research misconduct and administrative actions in response to allegations of research misconduct involving research conducted or supported by the PHS OPDIVs, including reversal of an institution's no misconduct finding or opening of a new investigation; (14) Provides administrative and management support on bioethical issues; (15) Provides support for the Office of the Surgeon General (OSG) in the exercise of statutory requirements and assigned activities as the Department's liaison for military and veterans issues and works with veterans associations and organizations to bring focus on the health needs of veterans and military families; (16) Through the OSG directs and manages the PHS Commissioned Corps, which includes a cadre of health professionals, and the associated personnel systems in support of the missions of the Department and public health activities of non-HHS agencies in which officers are assigned or detailed to, and provides oversight and direction for officer assignments and professional development; and (17) Provides policy, related administrative management, oversight, and routinely measure the effectiveness of the Commissioned Corps.

II. Delegations of Authority. Pending further re-delegation, Directives or orders made by the Secretary, or the Assistant Secretary for Health, all delegations and re-delegations of authority made to officials and employees of the affected organizational component will continue in effect pending further re-delegations, provided they are consistent with this reorganization.

Dated: December 27, 2011.

## Kathleen Sebelius,

Secretary.

[FR Doc. 2012–12172 Filed 5–18–12; 8:45 am] BILLING CODE 4150–42–P

#### DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### Office of the Secretary

#### Office of the Assistant Secretary for Health, Statement of Organization, Functions, and Delegations of Authority

Part A, Office of the Secretary, Statement of Organization, Function, and Delegation of Authority for the U.S. Department of Health and Human Services is being amended at Chapter AC, Office of the Assistant Secretary for Health (OASH), as last amended at 72 FR 58095-96, dated October 12, 2007; 69 FR 660-661, dated January 6, 2004; 68 FR 70507–10, dated December 18, 2003; 67 FR 71568-70, dated December 2, 2002; and most recently at 75 FR 53304-05, dated August 31, 2010. The amendment reflects the realignment of personnel oversight, administration and management functions for the U.S. Public Health Service (PHS) Commissioned Corps in the OASH. Specifically, it realigns these functions in the Office of the Surgeon General (ACM) and abolishes the Office of **Commissioned Corps Force** Management (ACQ). The changes are as follows:

I. Under Part A, Chapter AC, Office of the Assistant Secretary for Health, make the following changes:

A. Under Section AC.10 Organization, delete "L. Office of Commissioned Corps Force Management (ACQ)," in its entirety.

B. Under Section AC.20, Functions, delete Paragraph "I. Office of Surgeon General (ACM)," in its entirety and replace with the following:

I. Office of the Surgeon General (ACM)

Section ACM.00 Mission: The Office of the Surgeon General (OSG) is under the direction of the Surgeon General (SG) of the United States Public Health Service (PHS), who reports to the Assistant Secretary for Health (ASH) and provides staff support for: (1) Assuring day-to-day management of the PHS Commissioned Corps' operations, training, force readiness, and field command of deployments; (2) Issuing warnings to the public on identified health hazards; (3) Reviewing of the particulars of Department of Defense (DoD) plans for transportation, open air testing and disposal of lethal chemicals or biological warfare agents with respect to any hazards to public health and safety such transportation, testing, or disposal may pose and in recommending precautions necessary to protect the public health and safety (50

U.S.C. 1512 (2) & (3)); (4) Communicating with professional societies to receive, solicit, and channel concerns regarding health policy on behalf of the ASH; (5) Maintaining liaison with the Surgeons Generals of the Military Departments and the Under Secretary for Health of the Department of Veterans Affairs; (6) Representing PHS at national and international health and professional meetings to interpret PHS missions, policy, organizational responsibilities and programs, as assigned; (7) Maintaining and overseeing the activities of the Volunteer Medical Reserve Corps program (42 U.S.C. 300hh-15; (8) Providing liaison with governmental and non-governmental organizations on matters pertaining to military and veterans affairs. The Office provides staff support for: (9) Activities relating to membership on the Boards of Regents of the Uniformed Services University of the Health Sciences (per 10 U.S.C. 2113a(a)(3)) and other such positions as are authorized by law, further OASH's programmatic interests, and comply with Federal ethics, laws and regulations.

Section ACM.10 Organization: The OSG is comprised of the following components:

• Îmmediate Office of the Surgeon General (ACM)

• Division of Science and Communications (ACM1)

• Division of Commissioned Corps Personnel & Readiness (ACM2)

• Division of the Civilian Volunteer Medical Reserve Corps (ACM5)

• Division of Systems Integration (ACM6)

Section ACM.20 Functions: (a) Immediate Office of the Surgeon General (ACM): (1) Advises the ASH on matters relating to protecting and advancing the public health of the Nation; (2) Manages special deployments that address Presidential and Secretarial initiatives directed toward resolving critical public health problems; (3) Serves, as requested, as the spokesperson on behalf of the Secretary and the ASH, addressing the quality of public health practice on the Nation; (4) Provides supervision of activities relating to the day-to-day management of operations, training, force readiness, and deployment of officers of the PHS Commissioned Corps; (5) Provides advice to the ASH on the policies and implementation related to the appointment, promotion, assimilation, recognition, professional development, retirement, and other matters required for the efficient management of the Commissioned Corps; (6) Provides liaison with