

MAI Rapid HIV Testing Clinical Information Form is to use a standardized data collection instrument to fully capture essential clinical information to enhance preventive services for those who test HIV-negative and refer to quality treatment/medical care those who test HIV-positive.

The aim of the project is to implement and increase rapid HIV testing among racial and ethnic minorities and collect rapid HIV testing data using the MAI Rapid HIV Testing Clinical Information Form. To meet this requirement, all Grantees must offer their clients rapid

HIV preliminary antibody testing during outreach, pretreatment, or program enrollment. In addition, rapid HIV testing may be made available to the sexual and/or injection partners of clients. Grantees must provide onsite rapid HIV testing in accordance with their respective State and local requirements. If a client requests an off-site rapid HIV test, the Grantee must provide a referral to a rapid HIV testing site certified by the local health department.

Grantees are currently using the MAI Rapid HIV Testing Clinical Information

Form in the field to systematically collect information from clients on demographics, previous rapid HIV test results, substance use and sexual risk behaviors, current rapid HIV test results, types of services received, and confirmatory HIV test result. Once a client is offered a rapid HIV test, the Grantee staff completes the MAI Rapid HIV Testing Clinical Information Form with the client present and then enters the data into a secure Web site that allows for real-time data submission.

The estimated annualized burden is summarized below.

Respondents	Estimated number of respondents	Estimated number of responses per respondent	Average burden hours per response	Estimated total burden hours
MAI Rapid HIV Testing Clinical Information Form (FY 2008 and FY 2009–63 Grantees) .....	10,000	1	0.133	1,330
RHT form for 11 HIV program FY 2011 grantees (public health departments) .....	20,000	1	0.133	2,660
MAI Rapid HIV Testing Clinical Information Form (Re-test) .....	6,000	1	0.133	798
Total .....	30,000	.....	.....	4,788

Written comments and recommendations concerning the proposed information collection should be sent by July 12, 2012 to the SAMHSA Desk Officer at the Office of Information and Regulatory Affairs, Office of Management and Budget (OMB). To ensure timely receipt of comments, and to avoid potential delays in OMB's receipt and processing of mail sent through the U.S. Postal Service, commenters are encouraged to submit their comments to OMB via email to: *OIRA\_Submission@omb.eop.gov*. Although commenters are encouraged to send their comments via email, commenters may also fax their comments to: 202–395–7285. Commenters may also mail them to: Office of Management and Budget, Office of Information and Regulatory Affairs, New Executive Office Building, Room 10102, Washington, DC 20503.

**Summer King,**  
*Statistician.*

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Substance Abuse and Mental Health Services Administration**

**Agency Information Collection Activities: Submission for OMB Review; Comment Request**

Periodically, the Substance Abuse and Mental Health Services Administration (SAMHSA) will publish a summary of information collection requests under OMB review, in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these documents, call the SAMHSA Reports Clearance Officer on (240) 276–1243.

**Project: National Evaluation of the Comprehensive Community Mental Health Services for Children and Their Families Program: Phase VI (OMB No. 0930–0307)—REVISION**

The Substance Abuse and Mental Health Services Administration (SAMHSA), Center of Mental Health Services is responsible for the national evaluation of the Comprehensive Community Mental Health Services for Children and Their Families Program (Children's Mental Health Initiative—CMHI) that will collect data on child mental health outcomes, family life, and service system development. Data will be collected on 47 service systems, and approximately 6,561 children and families.

Principal changes from the previous Phase VI OMB approval include:

- Addition of nine (9) communities awarded cooperative agreements in FY2010 for data collection.
  - Replacement of intake and follow-up questionnaires for the Child Welfare Sector and Comparison Study with an administrative record review form to lessen burden.
  - Addition of a brief 8-item Education Sector Caregiver Questionnaire to the Education Sector and Comparison Study to capture family involvement in the development and use of Individualized Education Plans (IEPs).
  - Removal of data collection activities for the Alumni Networking Study, the CQI Initiative Evaluation, and the Sustainability Study.
- Data collection for this evaluation will be conducted over a five-year period. Child and family outcomes of interest will be collected at intake and during subsequent follow-up sessions at six-month intervals. The length of time that individual families will participate in the study is up to 24 months. The outcome measures include the following: Child symptomatology and functioning, family functioning, satisfaction, and caregiver strain. The core of service system data will be collected every 18–24 months throughout the 5-year evaluation period. Service utilization and cost data will be tracked and submitted to the national evaluation every six months using two tools: The Flex Fund Tool and the Services and Costs Data Tool to estimate

average cost of treatment per child, distribution of costs, and allocation of costs across service categories. Service delivery and system variables of interest include the following: Maturity of system of care development in funded system of care communities, adherence to the system of care program model, and client service experience.

In addition, the evaluation will include one special study: The Sector and Comparison Study will examine in more detail the outcomes and service

experience of children from multiple child-serving sectors and, through child-level matching, compare these outcomes with those not receiving system of care services.

Internet-based technology such as data entry and management tools will be used in this evaluation. The measures of the national evaluation address annual Congressional reporting requirements of the program's authorizing legislation, and the national outcome measures for

mental health programs as currently established by SAMHSA.

The average annual respondent burden is estimated below. The estimate reflects the average number of respondents in each respondent category, the average number of responses per respondent per year, the average length of time it will take to complete each response, and the total average annual burden for each category of respondent, and for all categories of respondents combined.

Instrument	Respondent	Number of respondents	Total average number of responses per respondent	Hours per response	Total burden hours	5-Year average annual burden hours
<b>System of Care Assessment</b>						
Interview Guides A–S .....	Key site informants.	1081	3	1.00	3,243	649
<b>Child and Family Outcome Study</b>						
Caregiver Information Questionnaire, Revised: Caregiver—Intake (CIQ–RC–I).	Caregiver .....	6,561	1	0.37	2,406	481
Caregiver Information Questionnaire, Revised: Staff as Caregiver—Intake (CIQ–RS–I).	Staff as Caregiver.					
Caregiver Information Questionnaire, Revised: Caregiver—Follow-Up (CIQ–RC–F).	Caregiver .....	6,561	4	0.28	7,436	1,487
Caregiver Information Questionnaire, Revised: Staff as Caregiver—Follow-Up (CIQ–RS–F).	Staff as Caregiver.					
Caregiver Strain Questionnaire (CGSQ).	Caregiver .....	6,561	5	0.17	5,478	1,096
Child Behavior Checklist 1½–5 (CBCL 1½–5).	Caregiver .....	6,561	5	0.33	10,924	2,185
Child Behavior Checklist 6–18 (CBCL 6–18).						
Education Questionnaire, Revision 2 (EQ–R2).	Caregiver .....	6,561	5	0.33	10,924	2,185
Living Situations Questionnaire (LSQ)	Caregiver .....	6,561	5	0.08	2,723	545
Behavioral and Emotional Rating Scale—Second Edition, Parent Rating Scale (BERS–2C).	Caregiver .....	5,389	5	0.17	4,500	900
Columbia Impairment Scale (CIS) .....	Caregiver .....	6,281	5	0.08	2,607	521
Parenting Stress Index (PSI) .....	Caregiver .....	2,151	5	0.08	896	179
Devereux Early Childhood Assessment for Infants (DECA 1–18M).	Caregiver .....	1,576	5	0.08	657	131
Devereux Early Childhood Assessment for Toddlers (DECA 18–36M).						
Devereux Early Childhood Assessment (DECA 2–5Y).						
Preschool Behavioral and Emotional Rating (PreBERS).	Caregiver .....	1,576	5	0.10	788	158
Delinquency Survey, Revised (DS–R)	Youth .....	3,986	5	0.13	2,657	531
Behavioral and Emotional Rating Scale—Second Edition, Youth Rating Scale (BERS–2Y).	Youth .....	3,986	5	0.17	3,328	666
Gain Quick–R: Substance Problem Scale (GAIN).	Youth .....	3,986	5	0.08	1,654	331
Substance Use Survey, Revised (SUS–R).	Youth .....	3,986	5	0.10	1,993	399
Revised Children's Manifest Anxiety Scale, Second Edition (RCMAS–2).	Youth .....	3,986	5	0.07	1,329	266
Reynolds Adolescent Depression Scale, Second Edition (RAD–2).	Youth .....	3,986	5	0.05	997	199
Youth Information Questionnaire, Revised—Intake (YIQ–R–I).	Youth .....	3,986	1	0.25	997	199

Instrument	Respondent	Number of respondents	Total average number of responses per respondent	Hours per response	Total burden hours	5-Year average annual burden hours
Youth Information Questionnaire, Revised—Follow-Up (YIQ-R-F).	Youth .....	3,986	4	0.25	3,986	797
<b>Service Experience Study</b>						
Multi-Sector Service Contacts, Revised: Caregiver—Intake (MSSC-RC-I).	Caregiver .....	6,561	1	0.25	1,640	328
Multi-Sector Service Contacts, Revised: Staff as Caregiver—Intake (MSSC-RS-I).	Staff as Caregiver.					
Multi-Sector Service Contacts, Revised: Caregiver—Follow-Up (MSSC-RC-F).	Caregiver .....	6,561	4	0.25	6,561	1,312
Multi-Sector Service Contacts, Revised: Staff as Caregiver—Follow-Up (MSSC-RS-F).	Staff as Caregiver.					
Cultural Competence and Service Provision Questionnaire, Revised (CCSP-R).	Caregiver .....	6,561	4	0.13	3,499	700
Youth Services Survey for Families (YSS-F).	Caregiver .....	6,561	4	0.12	3,071	614
Youth Services Survey (YSS) .....	Youth .....	3,986	4	0.08	1,323	265
<b>Comparison and Sector Study: Juvenile Justice</b>						
Court Representative Questionnaire (CRQ).	Court representatives.	202	5	0.50	505	101
Electronic Data Transfer of Juvenile Justice Records.	Key site personnel	202	5	0.03	34	7
<b>Comparison and Sector Study: Education</b>						
Teacher Questionnaire (TQ) .....	Teacher .....	202	5	0.50	505	101
School Administrator Questionnaire (SAQ).	School administrators.	202	5	0.50	505	101
Electronic Data Transfer of Education Records.	Key site personnel	202	5	0.03	34	7
Education Sector Caregiver Questionnaire (ESCQ).	Caregiver .....	202	5	0.08	81	16
<b>Comparison and Sector Study: Child Welfare</b>						
Electronic Data Transfer of Child Welfare Records.	Key site personnel	202	5	0.03	34	7
<b>Services and Costs Study</b>						
Flex Funds Data Dictionary/Tool .....	Local programming staff compiling/entering administrative data on children/youth.	1,565	3	0.03	155	31
Services and Costs Data Dictionary/ Data Entry Application.	Local evaluator, staff at partner agencies, and programming staff compiling/entering service and cost records on children/youth.	6,561	100	0.05	32,805	6,561
Respondent			Number of respondents	Number of responses/ respondent	Average burden/ response	Total average annual burden
Caregiver .....			6,561	0.9	2.2	12,838
Youth .....			3,986	0.9	1.1	3,653

Respondent	Number of respondents	Number of responses/respondent	Average burden/response	Total average annual burden
Provider/Administrator .....	1,081	12.9	0.5	7,564
Total .....	11,628	.....	.....	24,055

Written comments and recommendations concerning the proposed information collection should be sent by July 12, 2012 to the SAMHSA Desk Officer at the Office of Information and Regulatory Affairs, Office of Management and Budget (OMB). To ensure timely receipt of comments, and to avoid potential delays in OMB's receipt and processing of mail sent through the U.S. Postal Service, commenters are encouraged to submit their comments to OMB via email to: *OIRA\_Submission@omb.eop.gov*. Although commenters are encouraged to send their comments via email, commenters may also fax their comments to: 202-395-7285. Commenters may also mail them to: Office of Management and Budget, Office of Information and Regulatory Affairs, New Executive Office Building, Room 10102, Washington, DC 20503.

Summer King,  
Statistician.

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**DEPARTMENT OF HOMELAND SECURITY**

**U.S. Customs and Border Protection**

**Notice of Issuance of Final Determination Concerning Toshiba E-Studio Multi-Function Peripherals**

**AGENCY:** U.S. Customs and Border Protection, Department of Homeland Security.

**ACTION:** Notice of final determination.

**SUMMARY:** This document provides notice that U.S. Customs and Border Protection ("CBP") has issued a final determination concerning the country of origin of certain Toshiba e-Studio Multi-function Peripherals (MFPs), which perform imaging, scanning, faxing, and printing functions. Based upon the facts presented, CBP has concluded that the country where the last substantial transformation takes place is Singapore. Therefore, the country of origin of the MFPs is Singapore for purposes of U.S. Government procurement.

**DATES:** The final determination was issued on June 5, 2012. A copy of the final determination is attached. Any

party-at-interest, as defined in 19 CFR 177.22(d), may seek judicial review of this final determination on or before July 12, 2012.

**FOR FURTHER INFORMATION CONTACT:** Heather K. Pinnock, Valuation and Special Programs Branch: (202) 325-0034.

**SUPPLEMENTARY INFORMATION:** Notice is hereby given that on June 5, 2012, pursuant to subpart B of Part 177, U.S. Customs and Border Protection Regulations (19 CFR part 177, subpart B), CBP issued a final determination concerning the country of origin of certain Toshiba e-Studio MFPs which may be offered to the U.S. Government under an undesignated government procurement contract. This final determination, HQ H198875, was issued under procedures set forth at 19 CFR part 177, subpart B, which implements Title III of the Trade Agreements Act of 1979, as amended (19 U.S.C. 2511-18). In the final determination, CBP concluded that, based upon the facts presented, the country where the last substantial transformation takes place is Singapore. Therefore, the country of origin of the MFPs is Singapore for purposes of U.S. Government procurement.

Section 177.29, CBP Regulations (19 CFR 177.29), provides that a notice of final determination shall be published in the **Federal Register** within 60 days of the date the final determination is issued. Section 177.30, CBP Regulations (19 CFR 177.30), provides that any party-at-interest, as defined in 19 CFR 177.22(d), may seek judicial review of a final determination within 30 days of publication of such determination in the **Federal Register**.

Dated: June 5, 2012.

**Sandra L. Bell,**  
*Executive Director, Regulations and Rulings,*  
*Office of International Trade.*

**Attachment**

HQ H198875

June 5, 2012

**MAR OT:RR:CTF:VS H198875 HkP**

**CATEGORY: Origin**

David T. Ralston Jr., Esq.  
Foley & Lardner LLP  
3000 K Street, NW  
Suite 600

Washington, DC 20007-5109

**RE:** U.S. Government Procurement; Country of Origin of Toshiba e-Studio Multi-function Peripherals; Substantial Transformation

Dear Mr. Ralston:

This is in response to your letter, dated December 30, 2011, clarified on January 30, 2012, requesting a final determination on behalf of Toshiba America Business Solutions ("TABS"), pursuant to subpart B of part 177 of the U.S. Customs and Border Protection ("CBP") Regulations (19 C.F.R. Part 177). Under these regulations, which implement Title III of the Trade Agreements Act of 1979 ("TAA"), as amended (19 U.S.C. § 2511 et seq.), CBP issues country of origin advisory rulings and final determinations as to whether an article is or would be a product of a designated country or instrumentality for the purposes of granting waivers of certain "Buy American" restrictions in U.S. law or practice for products offered for sale to the U.S. Government.

This final determination concerns the country of origin of eight models of Toshiba e-Studio multi-function peripherals ("MFPs"). As a U.S. importer, TABS is a party-at-interest within the meaning of 19 C.F.R. § 177.22(d)(1) and is entitled to request this final determination.

**FACTS:**

Toshiba's MFPs perform imaging, scanning, faxing and printing functions. TABS imports eight models of MFPs from Singapore: (1) the e-Studio 3040CG; (2) the e-Studio 4540CG; (3) the e-Studio 5540CG; (4) the e-Studio 6540CG; (5) the e-Studio 306G; (6) the e-Studio 456G; (7) the e-Studio 656G; and, (8) the e-Studio 856G. The model numbers ending in "CG" offer full color printing while those ending in "G" offer monochrome printing only. Apart from this, the primary distinction between the model types is the speed at which they print documents. The model name incorporates the maximum page-per-minute ("ppm") output of each model. For example, the e-Studio 3040CG model prints a maximum of 30 ppm, and the e-Studio 856G model prints a maximum of 85 ppm. Each MFP model is primarily composed of the same