Address: 14205 Westfair West Drive, Houston, TX 77041.

Date Revoked: January 1, 2014. Reason: Failed to maintain valid londs.

License No.: 020490N.
Name: Tianjin Consol International
Inc. db United Consol Line Inc.
Address: 745 South Lemon Avenue,
Suite A-1-A, Walnut, CA 91789.
Date Revoked: February 4, 2014.
Reason: Voluntary Surrender of

License No.: 020660F.
Name: Gal International Inc.
Address: 5070 Parkside Avenue, Suite
3104, Philadelphia, PA 19131.
Date Revoked: December 7, 2013.
Reason: Failed to maintain a valid
bond.

License No.: 021128N.
Name: Blue Carrier Line, Inc.
Address: 157 Broad Street, Red Bank,
NJ 07701.

Date Revoked: January 15, 2014. Reason: Voluntary Surrender of License.

License No.: 021426N.
Name: Sunny Group USA, Inc.
Address: 17870 Castleton Street, Suite
107, City of Industry, CA 91748.
Date Revoked: February 12, 2014.
Reason: Voluntary Surrender of
License.

License No.: 022446NF.
Name: CJ GLS America, Inc.
Address: 6131 Orangethorpe Avenue,
Suite 410, Buena Park, CA 90620.
Date Revoked: February 20, 2014.
Reason: Voluntary Surrender of
License.

License No.: 022842NF. Name: CALS Logistics USA, Inc. Address: 729 N. Route 83, Suite 302, Bensenville, IL 60106.

Date Revoked: December 1, 2013. Reason: Failed to maintain valid bonds.

License No.: 023040F. Name: Pegasus Worldwide Logistics,

Address: 2660 East Del Amo Blvd., Carson, CA 90221.

Date Revoked: December 2, 2013. Reason: Failed to maintain a valid bond.

License No.: 023807N.

Name: Alpha Florida Trade, LLC. Address: 2930 NW 108th Avenue, Doral, FL 33172.

Date Revoked: January 31, 2014. Reason: Voluntary Surrender of License.

Sandra L. Kusumoto,

Director, Bureau of Certification and Licensing.

[FR Doc. 2014–05636 Filed 3–13–14; 8:45 am]

BILLING CODE 6730-01-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 March 31, 2014.

A. Federal Reserve Bank of Richmond (Adam M. Drimer, Assistant Vice President) 701 East Byrd Street, Richmond, Virginia 23261–4528:

1. Donald Edwards Willis, Cowpens, South Carolina, to acquire additional voting shares of First South Bancorp, Inc., and thereby indirectly acquire First South Bank, both of Spartanburg, South Carolina

B. Federal Reserve Bank of Kansas City (Dennis Denney, Assistant Vice President) 1 Memorial Drive, Kansas City, Missouri 64198–0001:

1. James Clark Shouse, Dallas, Texas, to acquire voting shares of The George Madison Corporation, and thereby indirectly acquire First National Bank, both of Pawnee, Pawnee, Oklahoma.

Board of Governors of the Federal Reserve System, March 11, 2014.

Michael J. Lewandowski,

Associate Secretary of the Board. [FR Doc. 2014–05656 Filed 3–13–14; 8:45 am]

BILLING CODE 6210-01-P

GOVERNMENT ACCOUNTABILITY OFFICE

Methodology Committee of the Patient-Centered Outcomes Research Institute (PCORI)

AGENCY: Government Accountability Office (GAO).

ACTION: Call for nominations.

SUMMARY: The Patient Protection and Affordable Care Act gave the Comptroller General of the United States responsibility for appointing not more than 15 members to a

Methodology Committee of the Patient-Centered Outcomes Research Institute. In addition, the Directors of the Agency for Healthcare Research and Quality and the National Institutes of Health, or their designees, are members of the Methodology Committee. Methodology Committee members must meet the qualifications listed in Section 6301 of the Act. Due to vacancies on the Committee, I am announcing the following: Letters of nomination and resumes should be submitted by April 11, 2014 to ensure adequate opportunity for review and consideration of nominees prior to appointment. Letters of nomination and resumes can be forwarded to either the email or mailing address listed below.

ADDRESSES:

Email: PCORIMethodology@gao.gov. Mail: U.S. GAO, Attn: PCORI Methodology Committee Appointments, 441 G Street NW., Washington, DC 20548

FOR FURTHER INFORMATION CONTACT: GAO: Office of Public Affairs, (202) 512–4800.

[Sec. 6301, Pub. L. 111-148]

Gene L. Dodaro,

 $\label{lem:comptroller} Comptroller\ General\ of\ the\ United\ States.$ [FR Doc. 2014–05443 Filed 3–13–14; 8:45 am]

BILLING CODE 1610-02-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

[Document Identifier: HHS-OS-21223-30D]

Agency Information Collection Activities; Submission to OMB for Review and Approval; Public Comment Request

AGENCY: Office of the Secretary, HHS.

ACTION: Notice.

SUMMARY: In compliance with section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the Office of the Secretary (OS), Department of Health and Human Services, has submitted an Information Collection Request (ICR), described below, to the Office of Management and Budget (OMB) for review and approval. The ICR is for reinstatement of a previously-approved information collection assigned OMB control number 0955-0009, which expired on February 28, 2014. Comments submitted during the first public review of this ICR will be provided to OMB. OMB will accept further comments from the public on this ICR during the review and approval period.

DATES: Comments on the ICR must be received on or before April 14, 2014.

ADDRESSES: Submit your comments to *OIRA_submission@omb.eop.gov* or via facsimile to (202) 395–5806.

FOR FURTHER INFORMATION CONTACT:

Information Collection Clearance staff, Information.CollectionClearance@hhs.gov or (202) 690–6162.

SUPPLEMENTARY INFORMATION: When submitting comments or requesting information, please include the OMB control number 0955–0009 and document identifier HHS-OS-21223-30D for reference.

Information Collection Request Title: Regional Extension Center Cooperative Agreement Program (CRM Tool).

OMB No.: 0955-0009.

Abstract: The Customer Relationship Management (CRM) application is a nimble business intelligence tool being used by more than 1,500 users at ONC partner organizations and grantees. The CRM collects data from a large number

of users throughout the United States who are "on the ground" helping healthcare providers adopt and optimize their IT systems, it provides near real-time data about the adoption, utilization, and meaningful use of EHR technology.

Approximately half of all Primary Care Providers in the nation are represented in the CRM tool; data points include provider location, credential, specialty, whether live on an EHR and what system, whether they've reached MU, the time between these, and narrative barriers experienced by many of these.

Need and Proposed Use of the Information: The CRM tool supplements and is regularly merged with other data sources both within and outside of HHS and tracks program performance and progress towards milestones. Combined with ONC's internal analytical capacity, this data provides feedback that goes beyond anecdotal evidence and can be turned into tangible lessons learned that

are used to focus policy and program efforts and ultimately achieve concrete outcomes.

Likely Respondents: Regional Extension Centers.

Burden Statement: Burden in this context means the time expended by persons to generate, maintain, retain, disclose or provide the information requested. This includes the time needed to review instructions, to develop, acquire, install and utilize technology and systems for the purpose of collecting, validating and verifying information, processing and maintaining information, and disclosing and providing information, to train personnel and to be able to respond to a collection of information, to search data sources, to complete and review the collection of information, and to transmit or otherwise disclose the information. The total annual burden hours estimated for this ICR are summarized in the table below.

TOTAL ESTIMATED ANNUALIZED BURDEN—HOURS

Forms (If necessary)	Type of respondent	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
CRM Tool	Regional Extension Center Community College Consortia	60 84	12 20	1.5 1.5	1,080 2,520
Total					3,600

Darius Taylor,

Deputy, Information Collection Clearance Officer.

[FR Doc. 2014–05657 Filed 3–13–14; 8:45 am] BILLING CODE 4150–45–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[CDC-2014-0005, Docket Number NIOSH-272]

Respiratory Protective Devices Used in Healthcare

AGENCY: National Institute for Occupational Safety and Health (NIOSH) of the Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: Notice of request for information and comment.

SUMMARY: Respiratory protective devices (RPDs) that are approved by the National Institute for Occupational Safety and Health (NIOSH) and also

cleared by the Food and Drug Administration (FDA) a as medical devices are widely used in surgical and non-surgical healthcare environments. There are reports b that other NIOSHapproved RPDs that are not FDA-cleared medical devices are also being used to protect healthcare workers from inhalation hazards. The desirability of NIOSH incorporating additional requirements and tests in its 42 CFR Part 84 respirator approval process to parallel the protections in the FDA clearance process for Surgical N95 Respirators in surgical and non-surgical healthcare environments has been mentioned during broad-based and cross-agency discussions for future pandemic events as well as day-to-day use in healthcare settings.

NIOSH could augment the existing requirements and tests of the 42 CFR Part 84 conformity assessment process to incorporate requirements included in the FDA clearance process, such as fluid resistance and flammability. Both FDA and NIOSH require demonstration of filtration performance. The current NIOSH filtration testing requirements use non-biological aerosol based on the assumption that all particles, biological or non-biological, behave according to the same principles of aerosol physics for filtration: That is, by impaction, interception, diffusion, and electrostatic attraction. NIOSH is seeking public comment with available supporting data that either validates or disproves this assumption.

NIOSH is requesting information and comments on the following:

1. Do healthcare stakeholders anticipate expanding the use of RPDs to include elastomeric air purifying respirators and/or Powered Air Purifying Respirators (PAPRs)?

2. For protections appropriate for RPDs to be used in surgical and/or non-surgical healthcare environments, should NIOSH consider adding tests and requirements to the 42 CFR Part 84 conformity assessment process for splash/spray protection (fluid resistance) per ASTM F1862:2000a, or other appropriate standards? NIOSH seeks evidence related to the

^a 21 CFR 878.4040 (FDA 510(K)Clearance)

^b Stradtman, L, Prevalence of Respiratory Protective Devices in U.S. Healthcare Systems, Internal NIOSH Survey Report, Jan. 7, 2014. (available in docket)