

**FOR FURTHER INFORMATION CONTACT:** Gary A. Kuiper or Manuel E. Cabeza, at the FDIC address above.

Proposal to renew the following currently-approved collections of information:

OMB Number: 3064–0114.  
Affected Public: Insured branches of foreign banks.

**SUPPLEMENTARY INFORMATION:**

1. Title: Foreign Banks.

Estimated Burden:

	Number of respondents	Responses per year	Hours per response	Burden hours
<i>Reporting Burden</i>				
Moving a Branch .....	1	1	8	8
Consent to Operate .....	1	1	8	8
Conduct Activities .....	1	1	8	8
Pledge of Assets Documents .....	10	4	.25	10
Reports .....	10	4	2	80
<i>Recordkeeping Burden</i> .....				
	10	1	120	1,200

Estimated Total Annual Burden: 1,314 hours.

*General Description:* The Foreign Banks information collection, 3064–0114, consist of: Applications to move an insured state-licensed branch of a foreign bank; applications to operate as such noninsured state-licensed branch of a foreign bank; applications from an insured state-licensed branch of a foreign bank to conduct activities that are not permissible for a federally-licensed branch; internal recordkeeping by such branches; and reporting and recordkeeping requirements relating to such a branch’s pledge of assets to the FDIC.

**Request for Comment**

Comments are invited on: (a) Whether the collection of information is necessary for the proper performance of the FDIC’s functions, including whether the information has practical utility; (b) the accuracy of the estimates of the burden of the information collection, including the validity of the methodology and assumptions used; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the information collection on respondents, including through the use of automated collection techniques or other forms of information technology. All comments will become a matter of public record.

Dated at Washington, DC, this 29th day of March, 2016.

Federal Deposit Insurance Corporation.

**Robert E. Feldman,**  
Executive Secretary.

[FR Doc. 2016–07403 Filed 3–31–16; 8:45 am]

**BILLING CODE 6714–01–P**

**FEDERAL DEPOSIT INSURANCE CORPORATION**

**Notice to All Interested Parties of the Termination of the Receivership of 10447, the Farmers Bank of Lynchburg; Lynchburg, Tennessee**

NOTICE IS HEREBY GIVEN that the Federal Deposit Insurance Corporation (“FDIC”) as Receiver for The Farmers Bank of Lynchburg, Lynchburg, Tennessee (“the Receiver”) intends to terminate its receivership for said institution. The FDIC was appointed receiver of The Farmers Bank of Lynchburg on June 15, 2012. 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 32.1, 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.

Dated: March 29, 2016.  
Federal Deposit Insurance Corporation.

**Robert E. Feldman,**  
Executive Secretary.

[FR Doc. 2016–07402 Filed 3–31–16; 8:45 am]

**BILLING CODE 6714–01–P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

[30Day–15–15BFV]

**Agency Forms Undergoing Paperwork Reduction Act Review**

The Centers for Disease Control and Prevention (CDC) has submitted the following information collection request to the Office of Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act of 1995. The notice for the proposed information collection is published to obtain comments from the public and affected agencies.

Written comments and suggestions from the public and affected agencies concerning the proposed collection of information are encouraged. Your comments should address any of the following: (a) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility; (b) Evaluate the accuracy of the agencies estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (c) Enhance the quality, utility, and clarity of the information to be collected; (d) Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submission of responses; and (e) Assess information collection costs.

To request additional information on the proposed project or to obtain a copy of the information collection plan and instruments, call (404) 639–7570 or send an email to [omb@cdc.gov](mailto:omb@cdc.gov). Written

comments and/or suggestions regarding the items contained in this notice should be directed to the Attention: CDC Desk Officer, Office of Management and Budget, Washington, DC 20503 or by fax to (202) 395-5806. Written comments should be received within 30 days of this notice.

**Proposed Project**

A Study of Viral Persistence in Ebola Virus Disease (EVD) Survivors—Existing Information Collection Without an OMB Control Number—National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), Centers for Disease Control and Prevention (CDC).

*Background and Brief Description*

Much progress has been made in the year since the CDC first responded to the Ebola outbreak in West Africa, but the agency’s efforts must continue until there are zero new cases of Ebola virus disease (EVD). As the CDC’s 2014 Ebola virus response maintains the international goal of zero new EVD cases in 2015, the agency must intensify its efforts to identify and prevent every potential route of human disease transmission and to understand the most current community barriers to reaching that final goal.

Persistence of Ebola Virus (EBOV) in Body Fluids of EVD Survivors in Sierra Leone is the first systematic examination of the post-recovery persistence of EBOV and the risks of

transmission from a cohort of convalescent Ebola survivors during close or intimate contact. It is important to fully understand how long the virus stays active in body fluids other than blood in order to target and refine public health interventions to arrest the ongoing spread of disease.

The research study is comprised of three modules based on the body fluids to be studied: A pilot module of adult males (semen) and two full modules: Module A of adult men and women repeating collections and questionnaires every two weeks (semen, vaginal secretions, and saliva, tears, sweat, urine, rectal swab), and Module B of lactating adult women repeating collections and questionnaires every three days (sweat and breast milk).

Participants for each module will be recruited by trained study staff from Ebola treatment units (ETUs) and survivor registries. Participants will be followed up at study sites in government hospitals.

Specimens will be tested for EBOV ribonucleic acid (RNA) by reverse transcription polymerase chain reaction test (RT-PCR) in Sierra Leone at the CDC laboratory facility in Bo. All positive RT-PCR samples will be sent to CDC Atlanta for virus isolation. Each body fluid will be collected until two negative RT-PCR results are obtained. Participants will be followed until all their studied body fluids are negative. They will receive tokens of appreciation

for their participation at the initial visit and again at every subsequent follow-up visit [e.g., 120,000 Leones (approximately \$28 US dollars) and a supply of condoms]. For Module A, men and women will be recruited in equal numbers for this study until more information on gender effects of viral persistence is available. A trained study data manager will collect test results for all participants in a laboratory results form.

Results and analyses are needed to update relevant counseling messages and recommendations from the Sierra Leone Ministry of Health, World Health Organization, and CDC. The study will provide the most current information that is critical to the development of public health measures, such as recommendations about sexual activity, breastfeeding, and other routine activities and approaches to evaluation of survivors to determine whether they can safely resume sexual activity. These approaches in turn are expected to reduce the risk of Ebola resurgence and mitigate stigma for thousands of survivors. The information is likewise critical to reducing the risk that Ebola would be introduced in a location that has not previously been affected.

The total burden hours requested for the research study in Sierra Leone is 2,474 hours incurred by 530 participants. There are no costs to the respondents other than their time.

**ESTIMATED ANNUALIZED BURDEN HOURS**

Type of respondent	Form name	Number of respondents	Number of responses per respondent	Average burden per response (hours)
Data Manager	Intake Form	1	550	20/60
Pilot participants	Survivor Questionnaire	100	1	30/60
Pilot participants	Survivor Follow-up Questionnaire	100	5	15/60
Pilot participants	3 & 6 Month Follow up Questionnaire	100	2	15/60
Main study male participants	Survivor Questionnaire	120	1	30/60
Main study male participants	Survivor Follow-up Questionnaire	120	12	15/60
Main study male participants	3 & 6 Month Follow up Questionnaire	120	2	15/60
Main study female participants	Survivor Questionnaire	120	1	30/60
Main study female participants	Survivor Follow-up Questionnaire	120	4	15/60
Main study female participants	3 & 6 Month Follow up Questionnaire	120	2	15/60
Data Manager	Laboratory Results Form	1	4,250	10/60

**Leroy A. Richardson,**  
 Chief, Information Collection Review Office,  
 Office of Scientific Integrity, Office of the  
 Associate Director for Science, Office of the  
 Director, Centers for Disease Control and  
 Prevention.

[FR Doc. 2016-07424 Filed 3-31-16; 8:45 am]

BILLING CODE 4163-18-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

#### Notice of Availability of the Final Environmental Assessment (Final EA) and a Finding of No Significant Impact (FONSI) for HHS/CDC Fort Collins Campus Proposed Improvements

**AGENCY:** Centers for Disease Control and Prevention, Department of Health and Human Services (HHS).

**ACTION:** Notice of Availability of Final Environmental Assessment and a Finding of No Significant Impact (FONSI) for HHS/CDC Fort Collins Campus Proposed Improvements.

**SUMMARY:** The Centers for Disease Control and Prevention (CDC), within the Department of Health and Human Services (HHS), is issuing this notice to advise the public that HHS/CDC has prepared and approved on March 22, 2016, a Finding of No Significant Impact (FONSI) based on the Final Environmental Assessment for proposed improvements on the HHS/CDC Fort Collins Campus. HHS/CDC prepared the Final EA in accordance with the National Environmental Policy Act of 1969 (NEPA), as amended (42 U.S.C. 4321 *et seq.*), the Council on Environmental Quality (CEQ) implementing regulations (40 CFR parts 1500–1508) and the HHS General Administration Manual (GAM) Part 30 Environmental Procedures, dated February 25, 2000. HHS/CDC has determined that the proposed action would not have a significant impact on the human or natural environment and therefore, the preparation of an Environmental Impact Statement is not required.

**DATES:** The FONSI and Final EA are available as of the publication date of this notice.

**ADDRESSES:** Copies of the FONSI and Final EA are available at the following locations:

- Old Town Library, 201 Peterson Street, Fort Collins, Colorado 80524.
- Harmony Library, 4616 South Shields, Fort Collins, Colorado 80526.

Copies of the FONSI and/or Final EA can also be requested from: Robert Lawson, Centers for Disease Control and Prevention, Asset Management Services Office, MS K80, 1600 Clifton Road, Atlanta, GA 30329, 770–488–2447.

**SUPPLEMENTARY INFORMATION:** The Centers for Disease Control and

Prevention (CDC), an Operating Division (OPDIV) of the Department of Health and Human Services (HHS) has prepared a Final EA to assess the potential impacts associated with the undertaking of proposed improvements on the HHS/CDC Fort Collins Campus (CDC Fort Collins Campus) located on the Colorado State University (CSU) Foothills Campus in Fort Collins, Colorado. The Final EA analyzed the effects of the Build Alternative (Proposed Action) and the No Build Alternative. The Build Alternative consists of improvements to the CDC Fort Collins Campus which entails the construction of a new approximately 5,600 gsf building which will house laboratory support freezer space and communal space, upgrades to existing parking areas and additional infrastructure improvements. The No Build Alternative represents the continued operation of the existing facilities at the CDC Fort Collins Campus without any new construction or infrastructure upgrades.

The Final EA evaluated the potential impacts to socioeconomic and environmental justice, land use, zoning, public policy, community facilities and services, transportation, air quality, noise, cultural resources, urban design and visual resources, natural resources, utility service, hazardous materials, greenhouse gases and sustainability, and construction. HHS/CDC assessed the potential impacts of the Build Alternative in the Final EA and as a result issued a FONSI indicating that the proposed action will not have a significant impact on the environment.

Dated: March 28, 2016.

**Sandra Cashman,**

*Executive Secretary, Centers for Disease Control and Prevention.*

[FR Doc. 2016–07368 Filed 3–31–16; 8:45 am]

**BILLING CODE 4163–18–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Medicare & Medicaid Services

[Document Identifier: CMS–10545, CMS–10309, CMS–855(A, B, I) and CMS–10468]

#### Agency Information Collection Activities: Proposed Collection; Comment Request

**AGENCY:** Centers for Medicare & Medicaid Services, HHS.

**ACTION:** Notice.

**SUMMARY:** The Centers for Medicare & Medicaid Services (CMS) is announcing an opportunity for the public to comment on CMS' intention to collect information from the public. Under the Paperwork Reduction Act of 1995 (the PRA), federal agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information (including each proposed extension or reinstatement of an existing collection of information) and to allow 60 days for public comment on the proposed action. Interested persons are invited to send comments regarding our burden estimates or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

**DATES:** Comments must be received by May 31, 2016.

**ADDRESSES:** When commenting, please reference the document identifier or OMB control number. To be assured consideration, comments and recommendations must be submitted in any one of the following ways:

1. *Electronically.* You may send your comments electronically to <http://www.regulations.gov>. Follow the instructions for "Comment or Submission" or "More Search Options" to find the information collection document(s) that are accepting comments.

2. *By Regular Mail.* You may mail written comments to the following address: CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development, Attention: Document Identifier/OMB Control Number \_\_, Room C4–26–05, 7500 Security Boulevard, Baltimore, Maryland 21244–1850.

To obtain copies of a supporting statement and any related forms for the proposed collection(s) summarized in this notice, you may make your request using one of following: