# FEDERAL RESERVE SYSTEM

### Notice of Proposals To Engage in or To Acquire Companies Engaged in **Permissible Nonbanking Activities**

The companies listed in this notice have given notice under section 4 of the Bank Holding Company Act (12 U.S.C. 1843) (BHC Act) and Regulation Y, (12 CFR part 225) to engage *de novo*, or to acquire or control voting securities or assets of a company, including the companies listed below, that engages either directly or through a subsidiary or other company, in a nonbanking activity that is listed in § 225.28 of Regulation Y (12 CFR 225.28) or that the Board has determined by Order to be closely related to banking and permissible for bank holding companies. Unless otherwise noted, these activities will be conducted throughout the United States.

Each notice is available for inspection at the Federal Reserve Bank indicated. The notice also will be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing on the question whether the proposal complies with the standards of section 4 of the BHC Act.

Unless otherwise noted, comments regarding the applications must be received at the Reserve Bank indicated or the offices of the Board of Governors not later than April 19, 2017.

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

1. First Midwest Bancorp, Inc., Itasca, Illinois; to retain Premier Asset Management LLC, and thereby engage in financial and investment advisory activities, pursuant to section  $225.28(b)(\overline{6})$  of Regulation Y.

Board of Governors of the Federal Reserve System, March 22, 2017.

#### Yao-Chin Chao,

Assistant Secretary of the Board. [FR Doc. 2017-05961 Filed 3-24-17; 8:45 am] BILLING CODE 6210-01-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

## **Centers for Disease Control and** Prevention

## Multi-Agency Informational Meeting **Concerning Compliance With the** Federal Select Agent Program; Public Webcast

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

**ACTION:** Notice of rescheduled public webcast.

SUMMARY: The HHS/CDC's Division of Select Agents and Toxins (DSAT) and the U.S. Department of Agriculture's Animal and Plant Health Inspection Service, Agriculture Select Agent Services (AgSAS) are jointly charged with the regulation of the possession, use and transfer of biological agents and toxins that have the potential to pose a severe threat to public, animal or plant health or to animal or plant products (select agents and toxins). This joint effort constitutes the Federal Select Agent Program. The purpose of the webcast is to provide guidance and information related to the Federal Select Agent Program for interested individuals.

**DATES:** The webcast, which was initially scheduled for Wednesday, February 8, 2017, is rescheduled for Friday, April 28, 2017 from 12 p.m. to 4 p.m. Eastern Daylight Time. Participants who have already registered for the webcast will not need to re-submit registration requests for the new date. All others who wish to join the webcast should register by April 14, 2017. Registration instructions can be found on the Web site http://www.selectagents.gov.

ADDRESSES: The webcast will be broadcast from CDC, 1600 Clifton Road NE., Atlanta, GA 30329. This will only be produced as a webcast; therefore, no accommodations will be provided for in-person participation.

FOR FURTHER INFORMATION CONTACT: CDC: Ms. Diane Martin, DSAT, Office of Public Health Preparedness and Response, CDC, 1600 Clifton Road NE., MS A-46, Atlanta, GA 30329; phone: 404–718–2000; email: lrsat@cdc.gov. APHIS: Dr. Charles Divan, AgSAS, APHIS, 4700 River Road, Unit 2, Riverdale, MD 20737; phone: 301-851-3300 (option 3); email: AgSAS@ aphis.usda.gov.

SUPPLEMENTARY INFORMATION: The public webcast, initially scheduled for Wednesday, February 8, 2017, and rescheduled for Friday, April 28, 2017, is an opportunity for the affected community (*i.e.*, registered entity responsible officials, alternate responsible officials, and entity owners) and other interested individuals to obtain specific regulatory guidance and information concerning biosafety, security and incident response issues related to the Federal Select Agent Program.

Representatives from the Federal Select Agent Program will be present during the webcast to address questions and concerns from the web participants.

Participants who have already registered for the February date will not need to re-submit registration requests for the new date. Individuals that have not registered and want to participate in the webcast should complete their registration online by April 14, 2017. The registration instructions are located on this Web site: http:// www.selectagents.gov.

Dated: March 15, 2017.

#### Sandra Cashman,

Executive Secretary, Centers for Disease Control and Prevention. [FR Doc. 2017-05952 Filed 3-24-17; 8:45 am]

BILLING CODE 4163-18-P

## DEPARTMENT OF HEALTH AND **HUMAN SERVICES**

#### **Centers for Disease Control and** Prevention

## [30 Day-17-16BFQ]

#### 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*. 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**

Survey of Sexually Transmitted Disease (STD) Provider Practices in the United States—NEW—National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (NCHHSTP), Centers for Disease Control and Prevention (CDC).

#### Background and Brief Description

Each year, 19.7 million sexually transmitted diseases (STDs) occur in the U.S., half of which strike youth 15–24 years of age. The public health burden of STDs is compounded by their economic impact. In 2010, an estimated \$15.6 billion in direct medical costs were attributed to STDs. Undiagnosed and untreated STDs can lead to serious long-term health consequences, especially for adolescent girls and young adult women. For example, every year, about 24,000 young women become infertile as a result of undiagnosed and untreated STDs.

There is no national survey that collects detailed information on the STD practices of physicians. The STD Provider Survey will collect much needed data from U.S. health care providers in five specialties: Primary care (including internal medicine), general or family practice, obstetrics/ gynecology, emergency medicine, and pediatrics. Knowledge of provider practices relative to guidelines and state-level laws and policies will provide information useful to stakeholders at all levels regarding the delivery of STD preventive services and treatment by health care providers in the U.S. As providers are one of the few professionals who have face-to-face contact with persons infected with STDs, they are also a potential intervention point for attempts to reduce re-infection and halt the further transmission of STDs.

The purpose of this survey is to conduct a nationally representative survey of physicians in five specialities: Primary care (including internal medicine), general or family practice, obstetrics/gynecology, emergency medicine, and pediatrics. Our sample size of physicians will allow for

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national estimates and comparisons among these five specialties. Additionally, the survey will provide national estimates for comparisons between providers in the public and private sectors. Information collected will also be used to determine STD prevention activities needed by type of providers (by specialty or public/ private) based on findings related to screening and treatment practices for STDs including EPT.

The survey contains sections on the physician's specialty areas, primary practice setting, primacy practice policies, patient demographics, STD testing and diagnosis, STD care and treatment, and respondent demographics.

In an effort to better understand policies and practices for STD care delivery among medical providers, the surveys will be sent to a random sample of 5,000 U.S. physicians across several specialties using the American Medical Association Master file. Using a multimode design (mail and web), multiple reminders will be sent to nonresponders in order to reach the target of 3,500 completed surveys. The total burden hours are 1,342. There is no cost to respondents other than their time.

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
	STD Provider Survey STD Provider Survey	2,625 875	1	20/60 32/60

#### 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. 2017–05932 Filed 3–24–17; 8:45 am] BILLING CODE 4163–18–P

### DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Centers for Disease Control and Prevention

[60Day-17-17WE; Docket No. CDC-2017-0025]

## Proposed Data Collection Submitted for Public Comment and Recommendations

**AGENCY:** Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS). **ACTION:** Notice with comment period.

**SUMMARY:** The Centers for Disease Control and Prevention (CDC), as part of its continuing efforts to reduce public burden and maximize the utility of government information, invites the general public and other Federal agencies to take this opportunity to comment on proposed and/or continuing information collections, as required by the Paperwork Reduction Act of 1995. This notice invites comment on a proposed information collection project titled "Knowledge, Attitudes, and Practices related to a Domestic Readiness Initiative on Zika Virus Disease." This project consists of telephone interviews with participants in Puerto Rico and the domestic U.S.

**DATES:** Written comments must be received on or before May 26, 2017.

**ADDRESSES:** You may submit comments, identified by Docket No. CDC–2017–0025 by any of the following methods:

• Federal eRulemaking Portal: Regulations.gov. Follow the instructions for submitting comments.

• *Mail:* Leroy A. Richardson, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE., MS– D74, Atlanta, Georgia 30329.

Instructions: All submissions received must include the agency name and Docket Number. All relevant comments received will be posted without change to *Regulations.gov*, including any personal information provided. For access to the docket to read background documents or comments received, go to *Regulations.gov*.

Please note: All public comment should be submitted through the Federal eRulemaking portal (Regulations.gov) or by U.S. mail to the address listed above.