

Peggy Gartner, Deputy Office Head, U.S. National Science Foundation
Alternate Members: None.
Authority: 5 U.S.C. 4313(c)(4).

Joshua Poole,

Senior Management and Program Analyst, Federal Mine Safety and Health Review Commission.

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BILLING CODE 6735–01–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 (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 applications are set forth in paragraph 7 of the Act (12 U.S.C. 1817(j)(7)).

The public portions of the applications listed below, as well as other related filings required by the Board, if any, are available for immediate inspection at the Federal Reserve Bank(s) indicated below and at the offices of the Board of Governors. This information may also be obtained on an expedited basis, upon request, by contacting the appropriate Federal Reserve Bank and from the Board's Freedom of Information Office at <https://www.federalreserve.gov/foia/request.htm>. Interested persons may express their views in writing on the standards enumerated in paragraph 7 of the Act.

Comments regarding each of these applications must be received at the Reserve Bank indicated or the offices of the Board of Governors, Ann E. Misback, Secretary of the Board, 20th Street and Constitution Avenue NW, Washington, DC 20551–0001, not later than October 23, 2023.

A. Federal Reserve Bank of Dallas (Karen Smith, Director, Mergers & Acquisitions) 2200 North Pearl Street, Dallas, Texas 75201–2272. Comments can also be sent electronically to Comments.applications@dal.frb.org:

1. *Wade O. Easley, individually and as trustee of The La Plata Bancshares, Inc. Employee Stock Ownership Plan/401K Trust (the "ESOP") and Holly W. Easley, all of Hereford, Texas; James O. Easley and Gloria Easley both of Wise River, Montana; and Steve Easley, Dawson, Texas;* to become the Easley Family control group, a group acting in concert to retain voting shares of La

Plata Bancshares, Inc., and thereby indirectly retain voting shares of The First National Bank of Hereford both of Hereford, Texas. Additionally, Wade O. Easley, individually and as trustee of the ESOP, to retain control of the voting shares of La Plata Bancshares, Inc., and indirectly voting shares of The First National Bank of Hereford.

Board of Governors of the Federal Reserve System.

Michele Taylor Fennell,

Deputy Associate Secretary of the Board.

[FR Doc. 2023–22310 Filed 10–5–23; 8:45 am]

BILLING CODE P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Advisory Council for the Elimination of Tuberculosis (ACET)

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

ACTION: Notice of meeting.

SUMMARY: In accordance with regulatory provisions, the Centers for Disease Control and Prevention (CDC) announces the following meeting of the Advisory Council for the Elimination of Tuberculosis Meeting (ACET). This meeting is open to the public, limited only by the number of audio and web conference lines (1,000 audio and web conference lines are available). Time will be available for the public.

DATES: The meeting will be held on December 12, 2023, from 9:30 a.m. to 4:30 p.m., EST, and December 13, 2023, from 10 a.m. to 12 p.m., EST.

Written comments must be submitted by December 5, 2023. Registration to make oral comments must be submitted by December 5, 2023.

ADDRESSES: The telephone access number is 1–669–254–5252, Webinar ID: Webinar ID: 160 466 2283, and the Passcode is 07266459. The web conference access is <https://cdc.zoomgov.com/j/1604662283?pwd=cZhoNzVrb1BYTHV0bzc0R1hFSml0UT09> Passcode: Xu0wFVH*. The number of available audio and web conference lines is 1,000.

FOR FURTHER INFORMATION CONTACT: Marah Condit, MS, Committee Management Lead, Office of Policy, Planning, and Partnerships, National Center for HIV, Viral Hepatitis, STD, and TB Prevention, Centers for Disease Control and Prevention, 1600 Clifton Road NE, Mailstop H24–6, Atlanta, GA

30329–4027, Telephone: (404) 639–3423; Email: nchhstppolicy@cdc.gov.

SUPPLEMENTARY INFORMATION:

Purpose: The Advisory Council for the Elimination of Tuberculosis (ACET) advises and makes recommendations regarding the elimination of tuberculosis (TB) to the Secretary of Health and Human Services, the Assistant Secretary for Health, and the Director, Centers for Disease Control and Prevention (CDC). Specifically, the Council makes recommendations regarding policies, strategies, objectives, and priorities; addresses the development and application of new technologies; provides guidance and review of CDC's Tuberculosis Prevention Research portfolio and program priorities; and reviews the extent to which progress has been made toward eliminating TB.

Matters to be Considered: The agenda will include discussions on: (1) data modernization initiative: DTBE priorities and activities; (2) NCHHSTP dataset and standardized variables; (3) TB Elimination Alliance: Community Engagement; and (4) updates from the American Thoracic Society; CDC; the Infectious Disease Society of America, and the European Respiratory Society on treatment guidelines. Agenda items are subject to change as priorities dictate.

Public Participation

Written Public Comment: Members of the public are welcome to submit written comments in advance of the meeting. Written comments must be submitted by emailing nchhstppolicy@cdc.gov with the subject line "ACET December 2023 Public Comment Registration" by December 5, 2023.

Oral Public Comment: Individuals who would like to make an oral comment during the public comment period must register by emailing nchhstppolicy@cdc.gov with subject line "ACET December 2023 Public Comment Registration" by December 5, 2023. The public comment period is on December 13, 2023, at 10:15 a.m., EST.

The Director, Office of Strategic Business Initiatives, Office of the Chief Operating Officer, Centers for Disease Control and Prevention, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and

Prevention and the Agency for Toxic Substances and Disease Registry.

Kalwant Smagh,

Director, Office of Strategic Business Initiatives, Office of the Chief Operating Officer, Centers for Disease Control and Prevention.

[FR Doc. 2023–22311 Filed 10–5–23; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–24–23DP]

Agency Forms Undergoing Paperwork Reduction Act Review

In accordance with the Paperwork Reduction Act of 1995, the Centers for Disease Control and Prevention (CDC) has submitted the information collection request titled “Public Health Law Fellowship (PHL Fellowship) Program: Assessment of Quality and Value” to the Office of Management and Budget (OMB) for review and approval. CDC previously published a “Proposed Data Collection Submitted for Public Comment and Recommendations” notice on March 23, 2023 to obtain comments from the public and affected agencies. CDC received one comment related to the previous notice. This notice serves to allow an additional 30 days for public and affected agency comments.

CDC will accept all comments for this proposed information collection project. The Office of Management and Budget is particularly interested in comments that:

(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. Comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to www.reginfo.gov/public/do/PRAMain. Find this particular information collection by selecting “Currently under 30-day Review—Open for Public Comments” or by using the search function. Direct written comments and/or suggestions regarding the items contained in this notice to the Attention: CDC Desk Officer, Office of Management and Budget, 725 17th Street NW, Washington, DC 20503 or by fax to (202) 395–5806. Provide written comments within 30 days of notice publication.

Proposed Project

Public Health Law Fellowship (PHL Fellowship) Program: Assessment of Quality and Value—New—National Center for STLT Public Health Infrastructure and Workforce (NCSTLTPHIW), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The mission of the Department of Health and Human Services (HHS) is to enhance the health and well-being of all Americans. As part of HHS, the Centers for Disease Control and Prevention (CDC) works to protect America from health, safety, and security threats, both foreign and in the U.S. CDC strives to fulfill this mission, in part, through a competent and capable public health workforce. One mechanism to developing the public health workforce is through training programs like the Public Health Law Fellowship Program (PHL Fellowship).

The mission of the PHL Fellowship is to train and provide experiential learning to current students and early career professionals in public health law and policy. The PHL Fellowship targets

current graduate students and law students, as well as recent graduates of graduate and law programs with a demonstrated interest in public health law. It is the goal of this fellowship that following participation in the program, alumni will seek employment within the public health law system (i.e., Federal, State, Tribal, local, or Territorial health agencies, or non-governmental organizations), focusing on health equity and/or emergency response.

This fellowship was created pursuant to American Rescue Plan funding to expand on the Public Health Law Program’s intern/extern program. There were no prior efforts to systematically evaluate the intern/extern program necessitating the creation of a systematic plan for administering, monitoring, and evaluating the PHL Fellowship. Evaluation priorities focus on continuously learning about program processes and activities to improve the program’s quality and documenting program outcomes to demonstrate impact and inform decision-making about future program direction. The purpose of this data collection is to inform these evaluation priorities through the collection of information from host site supervisors (n=40), fellowship participants (current cohort of fellows in a given year, n=70), and alumni (n=70). These data collections will be instrumental in helping CDC staff learn about these important stakeholder perspectives and will yield results that describe quality, impact, and value. Data will also inform program improvements such as refining the host site selection and matching process. Collection of this information moving forward will continue to meet these purposes and allow for longitudinal assessment of the PHL Fellowship, giving program leaders opportunities to see how this fellowship influences alumni career progression and contributions to public health over time.

OMB approval is requested for three years. Participation in the PHL Fellowship Program is voluntary but participation in data collection is required. There are no costs to respondents other than their time. The total estimated annualized burden is 149 hours.