

copied and displayed. The electronic system includes an automatic character counter that tells the user how many characters the states have left. This eliminates the need to independently track entries against the Maternal and Child Health Bureau's limits for each section and ensures compliance. The electronic system includes forms status checker and data alerts, which conduct automated checks on data validity, data

consistency, and application completeness, as well as value tolerance checks. This facilitates application review and eliminates much of previously required data cleaning activity. Also, this allows the user to obtain an immediate update at any point in time on the completeness and compliance of the application, reducing the need to conduct a review of the application. Data are saved directly to

the HRSA server so that no manual transmission is required. Finally, the automatic commitment of data to the HRSA server eliminates the need for version control or data migration.

The estimated average annual burden per year is as follows for the Annual Report and Application without the Needs Assessment:

| Type of respondent | Number of respondents | Responses per respondent | Burden hours per response | Total burden hours |
|---------------------|-----------------------|--------------------------|---------------------------|--------------------|
| States | 50 | 1 | 297 | 14,868 |
| Jurisdictions | 9 | 1 | 120 | 1,077 |
| Total | | | 59 | 15,945 |

Burden in the 3 Year Reporting Cycle for the Annual Report and Application with Needs Assessment is:

| Needs assessment | Number of respondents | Burden hours per responses | Responses per respondent | Total burden hours |
|--|-----------------------|----------------------------|--------------------------|--------------------|
| States/Jurisdictions | 59 | 378.5 | 1 | 22,303 |
| Total Average Burden for 3 year cycle | | | | 18,064 |

Send comments to Susan G. Queen, PhD., HRSA Reports Clearance Officer, Room 10-33, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. Written comments should be received within 60 days of notice.

Dated: September 23, 2005.

Tina M. Cheatham,

Director, Division of Policy Review and Coordination.

[FR Doc. 05-19432 Filed 9-28-05; 8:45 am]

BILLING CODE 4165-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Ricky Ray Hemophilia Relief Fund Program Administrative Close-Out

AGENCY: Health Resources and Services Administration, HHS.

ACTION: Notice.

SUMMARY: This Notice announces the administrative close-out of the Ricky Ray Hemophilia Relief Fund Program (the Program). All business concerning petitions and related payment documentation associated with the Program will conclude on October 31, 2005.

As of that date, the Program will cease to accept or process any additional documentation submitted by individuals (or their representatives) relating to the eligibility or payment of petitions still pending. Remaining funds will be returned to the United States Treasury, and the Program will archive all outstanding documentation at the Washington National Records Center in Suitland, Maryland, in accordance with the requirements of the National Archives and Records Administration.

DATES: Effective Date: October 31, 2005.

ADDRESSES: Ricky Ray Hemophilia Relief Fund Program, Healthcare Systems Bureau, Health Resources and Services Administration, U.S. Department of Health and Human Services, 5600 Fishers Lane, Room 11C-06, Rockville, Maryland 20857.

FOR FURTHER INFORMATION CONTACT: Paul T. Clark, Director, Ricky Ray Hemophilia Relief Fund Program, 5600 Fishers Lane, Room 11C-06, Rockville, MD 20857; (301) 443-2330.

SUPPLEMENTARY INFORMATION: The Program implemented the Ricky Ray Hemophilia Relief Fund Act of 1998 (the Act), Pub. Law 105-369. The Act established a Trust Fund to provide compassionate payments to individuals with blood-clotting disorders, such as hemophilia, who were treated with antihemophilic factor between July 1,

1982 and December 31, 1987, and contracted human immunodeficiency virus (HIV), as well as to certain persons who contracted HIV from these individuals. In the event individuals eligible for payment were deceased, the Act also provided for payments to certain survivors of these individuals.

Under section 101(d) of the Act, the Trust Fund terminated on November 12, 2003. The Act requires all remaining funds to be deposited in the miscellaneous receipts account in the Treasury of the United States.

The Program has made compassionate payments totaling in excess of \$559 million to more than 7,171 eligible individuals and survivors.

Dated: September 22, 2005.

Dennis P. Williams,

Deputy Administrator.

[FR Doc. 05-19430 Filed 9-28-05; 8:45 am]

BILLING CODE 4165-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Meetings: Organ Transplantation Advisory Committee

AGENCY: Health Resources and Services Administration, HHS.

ACTION: Notice of Meeting of the Advisory Committee on Organ Transplantation.

SUMMARY: Pursuant to Public Law 92-463, the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the ninth meeting of the Advisory Committee on Organ Transplantation (ACOT), Department of Health and Human Services (HHS). The meeting will be held from approximately 9 a.m. to 5:30 p.m. on November 3, 2005, and from 9 a.m. to 3 p.m. on November 4, 2005, at the Rockville DoubleTree Hotel, 1750 Rockville Pike, Rockville, Maryland 20852. The meeting will be open to the public; however, seating is limited and pre-registration is encouraged (see below).

SUPPLEMENTARY INFORMATION: Under the authority of 42 U.S.C. 217a, Section 222 of the Public Health Service Act, as amended, and 42 CFR 121.12 (2000), ACOT was established to assist the Secretary in enhancing organ donation, ensuring that the system of organ transplantation is grounded in the best available medical science, and assuring the public that the system is as effective and equitable as possible, and, thereby, increasing public confidence in the integrity and effectiveness of the transplantation system. ACOT is composed of up to 25 members, including the Chair. Members are serving as Special Government Employees and have diverse backgrounds in fields such as organ donation, health care public policy, transplantation medicine and surgery, critical care medicine and other medical specialties involved in the identification and referral of donors, non-physician transplant professions, nursing, epidemiology, immunology, law and bioethics, behavioral sciences, economics and statistics, as well as representatives of transplant candidates, transplant recipients, organ donors, and family members.

ACOT will hear presentations on living donor guidelines in New York and North Carolina, insurance issues related to living donors, deceased donor organ utilization, new Organ Procurement and Transplantation Network (OPTN) Lung Allocation System, OPTN development of a new Kidney Allocation System, OPTN decision to not develop a living donor registry, OPTN Strategic Planning, Organ Transplant Breakthrough Collaborative, and the Organ Procurement Organization Redesign Initiative.

The draft meeting agenda will be available on October 17 on the

Department's donation Web site at <http://www.organdonor.gov/acot.html>.

A registration form will be available on October 3 on the Department's donation Web site at <http://www.organdonor.gov/acot.html>. The completed registration form should be submitted by facsimile to Professional and Scientific Associates (PSA), the logistical support contractor for the meeting, at fax number (703) 234-1701. Individuals without access to the Internet who wish to register may call Bryan Slattery with PSA at (703) 234-1734. Individuals who plan to attend the meeting and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify the ACOT Executive Director, Thomas E. Balbier, Jr., in advance of the meeting. Mr. Balbier may be reached by telephone at 301-443-1896, e-mail:

Thom.Balbier@hrsa.hhs.gov, or in writing at the address of the Division of Transplantation provided below. Management and support services for ACOT functions are provided by the Division of Transplantation, Healthcare Systems Bureau, Health Resources and Services Administration, 5600 Fishers Lane, Parklawn Building, Room 12C-06, Rockville, Maryland 20857; telephone number 301-443-7577.

After the presentations and ACOT discussions, members of the public will have an opportunity to provide comments. Because of the Committee's full agenda and the timeframe in which to cover the agenda topics, public comment will be limited. All public comments will be included in the record of the ACOT meeting.

Dated: September 22, 2005.

Elizabeth M. Duke,

Administrator.

[FR Doc. 05-19431 Filed 9-28-05; 8:45 am]

BILLING CODE 4165-15-P

DEPARTMENT OF HOMELAND SECURITY

Coast Guard

[USCG-2005-21473]

Collection of Information Under Review by Office of Management and Budget (OMB): 1625-0010

AGENCY: Coast Guard, DHS.

ACTION: Request for comments. -

SUMMARY: In compliance with the Paperwork Reduction Act of 1995, this request for comments announces that the Coast Guard has forwarded one Information Collection Request (ICR)—

1625-0010, Defect/Noncompliance Report and Campaign Update Report—abstracted below, to the Office of Information and Regulatory Affairs (OIRA) of the Office of Management and Budget (OMB) for review and comment. Our ICR describes the information we seek to collect from the public. Review and comment by OIRA ensures that we impose only paperwork burdens commensurate with our performance of duties.

DATES: Please submit comments on or before October 31, 2005.

ADDRESSES: To make sure that your comments and related material do not reach the docket [USCG-2005-21473] or OIRA more than once, please submit them by only one of the following means:

(1)(a) By mail to the Docket Management Facility, U.S. Department of Transportation (DOT), room PL-401, 400 Seventh Street SW., Washington, DC 20590-0001. (b) By mail to OIRA, 725 17th St NW., Washington, DC 20503, to the attention of the Desk Officer for the Coast Guard.

(2)(a) By delivery to room PL-401 at the address given in paragraph (1)(a) above, between 9 a.m. and 5 p.m., Monday through Friday, except Federal holidays. The telephone number is (202) 366-9329. (b) By delivery to OIRA, at the address given in paragraph (1)(b) above, to the attention of the Desk Officer for the Coast Guard.

(3) By fax to (a) the Facility at (202) 493-2298 and (b) OIRA at (202) 395-6566, or e-mail to OIRA at oira-docket@omb.eop.gov attention: Desk Officer for the Coast Guard.

(4)(a) Electronically through the Web site for the Docket Management System at <http://dms.dot.gov>. (b) OIRA does not have a Web site on which you can post your comments.

The Docket Management Facility maintains the public docket for this notice. Comments and material received from the public, as well as documents mentioned in this notice as being available in the docket, will become part of this docket and will be available for inspection or copying at room PL-401 on the Plaza level of the Nassif Building, 400 Seventh Street SW., Washington, DC, between 9 a.m. and 5 p.m., Monday through Friday, except Federal holidays. You may also find this docket on the Internet at <http://dms.dot.gov>.

Copies of the complete ICR are available through this docket on the Internet at <http://dms.dot.gov>, and also from Commandant (CG-611), U.S. Coast Guard Headquarters, room 6106 (Attn: Ms. Barbara Davis), 2100 Second Street SW., Washington, DC 20593-0001. The telephone number is (202) 267-2326.