• Develop, monitor progress on, report on, and periodically update program plans in their respective areas of responsibility.

The CEO or EEO Director may also establish standing committees to deal with specific issues as they arise. The Head of each Agency office will provide support to the individuals identified above on an as needed basis upon request from the EEO Director.

Adopted this 13th day of July 2006 by Order of the Board.

Dated: August 8, 2006.

Roland E. Smith,

Secretary, Farm Credit Administration Board. [FR Doc. E6–13306 Filed 8–11–06; 8:45 am] BILLING CODE 6705–01–P

FEDERAL RESERVE SYSTEM

Formations of, Acquisitions by, and Mergers of Bank Holding Companies

The companies listed in this notice have applied to the Board for approval, pursuant to the Bank Holding Company Act of 1956 (12 U.S.C. 1841 et seq.) (BHC Act), Regulation Y (12 CFR part 225), and all other applicable statutes and regulations to become a bank holding company and/or to acquire the assets or the ownership of, control of, or the power to vote shares of a bank or bank holding company and all of the banks and nonbanking companies owned by the bank holding company, including the companies listed below.

The applications listed below, as well as other related filings required by the Board, are available for immediate inspection at the Federal Reserve Bank indicated. The application also will be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing on the standards enumerated in the BHC Act (12 U.S.C. 1842(c)). If the proposal also involves the acquisition of a nonbanking company, the review also includes whether the acquisition of the nonbanking company complies with the standards in section 4 of the BHC Act (12 U.S.C. 1843). Unless otherwise noted, nonbanking activities will be conducted throughout the United States. Additional information on all bank holding companies may be obtained from the National Information Center Web site at http://www.ffiec.gov/nic/.

Unless otherwise noted, comments regarding each of these applications must be received at the Reserve Bank indicated or the offices of the Board of Governors not later than September 8, 2006.

- A. Federal Reserve Bank of Atlanta (Andre Anderson, Vice President) 1000 Peachtree Street, NE., Atlanta, Georgia 30309:
- 1. Florida Bank Group, Inc., Tampa, Florida; to acquire 100 percent of the voting shares of Bank of North Florida, Jacksonville, Florida.

Board of Governors of the Federal Reserve System, August 9, 2006.

Robert deV. Frierson,

Deputy Secretary of the Board. [FR Doc. E6–13232 Filed 8–11–06; 8:45 am] BILLING CODE 6210–01–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifier: CMS-576A, CMS-10203, CMS-R-64, CMS-3070G-I, and CMS-304/304A]

Agency Information Collection Activities: Proposed Collection; Comment Request

Agency: Centers for Medicare & Medicaid Services, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Centers for Medicare & Medicaid Services (CMS) is publishing the following summary of proposed collections for public comment. Interested persons are invited to send comments regarding this burden estimate 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

1. Type of Information Collection Request: Extension of a currently approved collection; Title of Information Collection: Organ Procurement Organization's (OPO's) Health Insurance Benefits Agreement and Supporting Regulations at 42 CFR 486.301–486.348; Use: The information provided on this form serves as a basis for continuing the agreements with CMS and the 58 OPOs for participation in the Medicare and Medicaid programs and for reimbursement of service; Form

- Number: CMS-576A (OMB#: 0938-0512; Frequency: Reporting—Every 4 years and as needed; Affected Public: Business or other for-profit and Not-for-profit institutions; Number of Respondents: 58; Total Annual Responses: 58; Total Annual Hours: 116.
- 2. Type of Information Collection Request: New collection; Title of Information Collection: Medicare Health Outcome Survey (HOS) and supporting regulations at 42 CFR 422.152; Use: The Medicare Prescription Drug, Improvement, and Modernization Act of 2003 mandates the collection, analysis and reporting of health outcomes information. The collection of Medicare health outcomes information is necessary to hold Medicare managed care contractors accountable for the quality of care they are delivering. This reporting requirement allows CMS to obtain the information necessary for the proper oversight of the program; Form Number: CMS-10203 (OMB#: 0938-New; Frequency: Recordkeeping, Reporting: Annually; Affected Public: Individuals or Households, Business or other for-profit and Not-for-profit institutions; Number of Respondents: 320,040; Total Annual Responses: 320,040; Total Annual Hours: 105,613.
- 3. Type of Information Collection Request: Extension of a currently approved information collection; Title of Information Collection: Indirect Medical Education (IME) and Supporting Regulations 42 CFR 412.105; Direct Graduate Medical Education (GME) and Supporting Regulations in 42 CFR 413.75–413.73; *Use:* The collection of information on interns and residents (IR) is needed to properly calculate Medicare program payments to hospitals that incur indirect and direct costs for medical education. The agency's Intern and Resident Information System (IRIS) and similar contractor systems use the information for producing reports of duplicate fulltime equivalent IR counts for IME and GME. The contractors also use this information to ensure that hospitals are properly reimbursed for IME and GME, and help eliminate duplicate reporting of IR counts which inflate payments. The collection of this information affects 1,215 hospitals which participate in approved medical education programs; Form Number: CMS-R-64 (OMB#: 0938-0456); Frequency: Recordkeeping and Reporting-Annually; Affected Public: Not-for-profit and Business or other for-profit institutions; Number of Respondents: 1,215; Total Annual Responses: 1,215; Total Annual Hours: 2,430.

4. Type of Information Collection Request: Extension of a currently approved information collection; Title of Information Collection: Intermediate Care Facility for the Mentally Retarded or Persons with Related Conditions ICF/ MR Survey Report Form and Supporting Regulations at 42 CFR 442.30, 483.410, 483.420, 483.440, 483.50, and 483.460; Use: The survey forms are needed to ensure provider compliance. In order to participate in the Medicaid program as an ICF/MR, providers must meet Federal standards. The survey report form is used to record providers' level of compliance with the individual standard requirements and report it to the Federal government; Form Number: CMS-3070G-I (OMB#: 0938-0062); Frequency: Recordkeeping and Reporting—Annually; Affected Public: Business or other for-profit and Not-forprofit institutions; Number of Respondents: 6,428; Total Annual Responses: 6,428; Total Annual Hours:

5. Type of Information Collection Request: Extension of a currently approved information collection; Title of Information Collection: Reconciliation of State Invoice and Prior Quarter Adjustment Statement; Use: Section 1927 of the Social Security Act requires drug labelers to enter into and have in effect a rebate agreement with CMS for States to receive funding for drugs dispensed to Medicaid recipients. Drug manufacturers must complete and submit to States the CMS-304 form to explain any rebate payment adjustments for the current quarter, and complete and submit the CMS-304A form to States to explain rebate payment adjustments to any prior quarters. Both forms are used to reconcile drug rebate payments made by manufacturers with the States' invoices of rebates due; Form Number: CMS-304/304A (OMB#: 0938-0676); Frequency: Recordkeeping and Reporting—Quarterly; Affected Public: Business or other for-profit; Number of Respondents: 550; Total Annual Responses: 3,740; Total Annual Hours: 139,480.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access CMS's Web site address at

http://www.cms.hhs.gov/ PaperworkReductionActof1995, or E-mail your request, including your address, phone number, OMB number, and CMS document identifier, to Paperwork@cms.hhs.gov, or call the Reports Clearance Office on (410) 786– 1326.

To be assured consideration, comments and recommendations for the

proposed information collections must be received at the address below, no later than 5 p.m. on October 13, 2006.

CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development—A, Attention: Melissa Musotto, Room C4–26–05, 7500 Security Boulevard, Baltimore, Maryland 21244–1850.

Dated: August 3, 2006.

Michelle Shortt,

Director, Regulations Development Group, Office of Strategic Operations and Regulatory Affairs.

[FR Doc. E6-13189 Filed 8-11-06; 8:45 am] BILLING CODE 4120-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. 1997D-0318] (formerly Docket No. 97D-0318)

Draft Guidance for Industry on an Amendment Involving Donor Deferral for Transfusion in France Since 1980 to "Guidance for Industry: Revised Preventive Measures to Reduce the Possible Risk of Transmission of Creutzfeldt-Jakob Disease (CJD) and Variant Creutzfeldt-Jakob Disease (vCJD) by Blood and Blood Products"; Availability

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing the availability of a draft document entitled "Guidance for Industry: Amendment (Donor Deferral for Transfusion in France Since 1980) to 'Guidance for Industry: Revised Preventive Measures to Reduce the Possible Risk of Transmission of Creutzfeldt-Jakob Disease (CJD) and Variant Creutzfeldt-Jakob Disease (vCJD) by Blood and Blood Products," dated August 2006. The draft guidance document, when finalized, is intended to amend FDA's "Guidance for Industry: Revised Preventive Measures to Reduce the Possible Risk of Transmission of Creutzfeldt-Jakob Disease (CJD) and Variant Creutzfeldt-Jakob Disease (vCJD) by Blood and Blood Products" dated January 2002. This draft guidance, which is a level I guidance document, would add to the January 2002 guidance a donor deferral recommendation for donors who have received a transfusion of blood or blood components in France since 1980. After we review comments received on this draft guidance, we intend to incorporate this donor deferral recommendation and reissue the revised January 2002 guidance as a level II guidance document for immediate implementation.

DATES: Submit written or electronic comments on the draft guidance by October 13, 2006 to ensure their adequate consideration in preparation of the revisions to the 2002 guidance. General comments on agency guidance documents are welcome at any time.

ADDRESSES: Submit written requests for single copies of the draft guidance to the Office of Communication, Training, and Manufacturers Assistance (HFM-40), Center for Biologics Evaluation and Research (CBER), Food and Drug Administration, 1401 Rockville Pike, suite 200N, Rockville, MD 20852-1448. Send one self-addressed adhesive label to assist the office in processing your requests. The draft guidance may also be obtained by mail by calling CBER at 1-800-835-4709 or 301-827-1800. See the **SUPPLEMENTARY INFORMATION** section for electronic access to the draft guidance document.

Submit written comments on the draft guidance to the Division of Dockets Management (HFA-305), Food and Drug Administration, 5630 Fishers Lane, rm. 1061, Rockville, MD 20852. Submit electronic comments to http://www.fda.gov/dockets/ecomments.

FOR FURTHER INFORMATION CONTACT:

Brenda R. Friend, Center for Biologics Evaluation and Research (HFM–17), Food and Drug Administration, 1401 Rockville Pike, suite 200N, Rockville, MD 20852–1448, 301–827–6210.

SUPPLEMENTARY INFORMATION:

I. Background

FDA is announcing the availability of a draft document entitled "Guidance for Industry: Amendment (Donor Deferral for Transfusion in France Since 1980) to 'Guidance for Industry: Revised Preventive Measures to Reduce the Possible Risk of Transmission of Creutzfeldt-Jakob Disease (CJD) and Variant Creutzfeldt-Jakob Disease (vCJD) by Blood and Blood Products'' dated August 2006 (Draft Guidance). The Draft Guidance is intended to amend FDA's "Guidance for Industry: Revised Preventive Measures to Reduce the Possible Risk of Transmission of Creutzfeldt-Jakob Disease (CJD) and Variant Creutzfeldt-Jakob Disease (vCJD) by Blood and Blood Products" (CJD/ vCID Guidance), dated January 2002, by adding a donor deferral recommendation for donors who have received a transfusion of blood or blood components in France since 1980. After we review comments received on this Draft Guidance, we intend to