

application questionnaire (or a facsimile thereof prepared on a word processor), and forward it to Ms. Kate LaBuda of the Office Payer Compliance, at the address below.

ADDRESSES: Internal Revenue Service, CP:EX:ST:PC, 1111 Constitution Avenue, NW., Room 2013, Washington, DC 20224.

DATES: Completed questionnaires (or facsimiles) should be received by IRS no later than Friday, May 16, 1997.

Questionnaires received after this date will not be considered. An acknowledgment letter will be sent upon receipt.

FOR FURTHER INFORMATION CONTACT: To have a copy of the application questionnaire mailed or faxed to you, please call Ms. Thomasine Matthews at 202-622-4214 (not a toll-free number). For general information about the application process or IRPAC in general, call Kate LaBuda at 202-622-3404 (not a toll-free number).

Dated: March 24, 1997.

Approved:

Kate LaBuda,

Acting Director, Office of Payer Compliance.

Attachment

Information Reporting Program Advisory Committee Membership Application Questionnaire

The following questions must be answered by anyone interested in becoming a member of the Information Reporting Program Advisory Committee (IRPAC). Applications (or facsimiles produced on a word processor) must be received at the address listed below by May 16, 1997. Those received after this date will not be considered. All applications received will be acknowledged. Questions may be directed to Kate LaBuda at 202-622-3404.

Ms. Kate LaBuda, CP:EX:ST:PC, Internal Revenue Service, Room 2013, 1111 Constitution Avenue, NW., Washington, DC 20224

1. Name:
2. Title:
3. Employer Name:
4. Business Address:
5. Business Phone:
6. Fax Number:
7. E-Mail Address:
8. If you are applying on behalf of an organization or association other than your employer, please state the name, and address of that organization. Also, provide a letter of reference from that organization stating that you are nominated on their behalf. This letter should contain the name of a contact and this contact's phone number.

9. Home Address:

10. Home Phone:

11. Have you ever served on IRPAC or the Commissioner's Advisory Group (CAG)? If so, please explain. Do you currently have an application pending for CAG membership?

12. Check the *one* segment of the Information Reporting Program (IRP) payer community to which the organization that you represent, and your experience, most closely relate:

- ☐ Real Estate
- ☐ Transmitter/Forms Developer
- ☐ Software Developer
- ☐ Insurance: Property & Casualty
- ☐ Insurance: Life
- ☐ Securities
- ☐ Mutual Funds
- ☐ Payroll
- ☐ State & Local Government
- ☐ Corporate Compliance
- ☐ Small Business Compliance
- ☐ Public Accounting
- ☐ Employee Plans
- ☐ Trust Company
- ☐ Corporate Transfer Agent/Utilities
- ☐ Large Banks/Financial Institution
- ☐ Small Banks/Financial Institution
- ☐ Restaurant Industry
- ☐ Other

(Please specify. _____)

13. List the number of years of IRP-related experience you have, and specific sources of this IRP experience. (Account for all years of IRP experience claimed.)

14. List professional credentials (e.g., Ph.D., CPA, Enrolled Agent, Attorney, Accountant, etc.)

15. Identify organizations to which you belong and any relevant leadership positions you have held.

16. List any previous IRS employment (please state position(s), title(s), and time in each position):

17. Please propose two topic ideas that you feel would be appropriate for discussion by IRPAC. Include a short description (three sentences) of each topic.

The Following Three Items Are Required for an FBI Name Check

18. Date of Birth:

19. Place of Birth:

20. Other names ever used:

The Following Items Are Required for an IRS Tax Check. (Please Note That a Tax Check is not a Tax Audit.)

The Internal Revenue Service will perform the standard Federal Advisory Committee member tax check, (pursuant to 26 U.S.C. 6103; 5 U.S.C. 1303; Executive Orders 9397, 11222, 10450; CFR 5.2; 31 CFR Part O, Treasury Department Order Nos. 82 (Revised) and 150-87) and provide the information

obtained to the Assistant Secretary (Administration) of the Treasury Department. The purpose of this tax check is to promote public confidence in the integrity of the Treasury Department and its administration of the Federal tax system. Your Social Security Number is required to identify your tax records accurately. This tax check must be completed prior to any appointment to this Federal Advisory Committee and you are now being asked to voluntarily provide the following information and, at a later time, you will be asked to sign a formal tax check waiver:

21. Social Security Number (SSN):

22. Spouse's name and SSN (if married and filing jointly):

The Following Item is Required Because of the Foreign Agents Registration Act (FARA), as Amended

23. I presently ____ am/ ____ am not required to register as an agent of a foreign principal under FARA, as amended.

Note: Pursuant to 18 U.S.C. sec. 219, an individual who is required to register as an agent of a foreign principal under FARA is prohibited from serving on IRPAC. By executing this questionnaire, you agree that (1) if you are required to register as an agent of a foreign principal under the FARA before your term commences on IRPAC, you will terminate any and all such agencies prior to beginning your tenure and will provide appropriate verification therefor; and (2) you will immediately resign from IRPAC if you become such an agent at any time during your term.

CERTIFICATION

24. I certify that, to the best of my knowledge and belief, all of my statements are true, correct, complete, and made in good faith. I also agree to the background checks set forth herein.

Signature

Date

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BILLING CODE 4830-01-U

Office of Thrift Supervision

Proposed Agency Information Collection Activities; Comment Request

AGENCY: Office of Thrift Supervision, Department of Treasury.

ACTION: Notice and request for comments.

SUMMARY: The Department of the Treasury, as part of its continuing effort

to reduce paperwork and respondent burden, 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, Public Law 104-13. Currently, the Office of Thrift Supervision within the Department of the Treasury is soliciting comments concerning the Instructions for Filling out the Interest-Rate Risk Appeals Submission.

DATES: Written comments should be received on or before May 27, 1997 to be assured of consideration.

ADDRESSES: Send comments to Manager, Dissemination Branch, Records Management and Information Policy, Office of Thrift Supervision, 1700 G Street, NW., Washington, DC 20552, Attention 1550-0084. These submissions may be hand delivered to 1700 G Street, NW., from 9:00 a.m. to 5:00 p.m. on business days; they may be sent by facsimile transmission to FAX Number (202) 906-7755. Comments over 25 pages in length should be sent to FAX Number (202) 906-6956. Comments will be available for inspection at 1700 G Street, NW., from 9:00 a.m. until 4:00 p.m. on business days.

FOR FURTHER INFORMATION CONTACT: Requests for additional information should be directed to Robert Kazden, Supervision, Office of Thrift Supervision, 1700 G Street, NW., Washington, DC 20552, (202) 906-5759.

SUPPLEMENTARY INFORMATION:

Title: Instructions for Filling Out the Interest-Rate Risk Appeals Submission.

Form Number: OTS Form 1586-A and OTS Form 1586-I.

Abstract: These forms are used by OTS to obtain information from savings associations which want to appeal their interest-rate risk component.

Current Actions: This is an extension of an already approved information collection.

Type of Review: Regular Submission.
Affected Public: Business or For Profit.

Estimated Number of Respondents: 9.
Estimated Time Per Respondent: 18.89 minutes average.

Estimated Total Annual Burden Hours: 170 hours.

Request for Comments

Comments submitted in response to this notice will be summarized and/or included in the request for OMB approval. All comments will become a matter of public record. Comments are invited on: (a) Whether the collection of

information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the collection of information; (c) ways to enhance the quality; (d) ways to minimize the burden of the collection of information on respondents, including the use of automated collection techniques or other forms of information technology, and (e) estimates of capital or start-up costs and costs of operation, maintenance, and purchase of services to provide information.

Dated: March 19, 1997.

Catherine C. M. Teti,

Director, Records Management and Information Policy.

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Proposed Agency Information Collection Activities; Comment Request

AGENCY: Office of Thrift Supervision, Department of Treasury.

ACTION: Notice and request for comments.

SUMMARY: The Department of the Treasury, as part of its continuing effort to reduce paperwork and respondent burden, 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, Public Law 104-13. Currently, the Office of Thrift Supervision within the Department of the Treasury is soliciting comments concerning the Electronic Loan Data Request Survey.

DATES: Written comments should be received on or before May 27, 1997 to be assured of consideration.

ADDRESSES: Send comments to Manager, Dissemination Branch, Records Management and Information Policy, Office of Thrift Supervision, 1700 G Street, NW., Washington, DC 20552, Attention 1550-0084. These submissions may be hand delivered to 1700 G Street, NW., from 9:00 a.m. to 5:00 p.m. on business days; they may be sent by facsimile transmission to FAX Number (202) 906-7755. Comments over 25 pages in length should be sent to FAX Number (202) 906-6956. Comments will be available for inspection at 1700 G Street, NW., from 9:00 a.m. until 4:00 p.m. on business days.

FOR FURTHER INFORMATION CONTACT: Requests for additional information should be directed to Robyn Dennis, Supervision, Office of Thrift Supervision, 1700 G Street, NW., Washington, DC 20552, (202) 906-5751.

SUPPLEMENTARY INFORMATION:

Title: Electronic Loan Data Request Survey.

Form Number: OTS Form 1630.

Abstract: OTS is changing a portion of its examination process. Thrift institutions are being asked to provide loan information to OTS examiners electronically. This survey will allow OTS to determine whether the new system reduces the burden of the on-site examination process by providing information on the cost, ease, and amount of time required to prepare the loan information electronically, in comparison with the previous paper-based system.

Current Actions: New Collection.

Type of Review: Regular Submission.

Affected Public: Business or For Profit.

Estimated Number of Respondents: 500.

Estimated Time Per Respondent: .25 hours.

Estimated Total Annual Burden Hours: 125 hours.

Request for Comments

Comments submitted in response to this notice will be summarized and/or included in the request for OMB approval. All comments will become a matter of public record. Comments are invited on: (a) Whether the collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the collection of information; (c) ways to enhance the quality; (d) ways to minimize the burden of the collection of information on respondents, including the use of automated collection techniques or other forms of information technology, and (e) estimates of capital or start-up costs and costs of operation, maintenance, and purchase of services to provide information.

Dated: March 21, 1997.

Catherine C. M. Teti,

Director, Records Management and Information Policy.

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