

People 2010: Volumes I and II can be purchased by calling (202) 512-1800 (cost \$70.00 for printed version; \$20.00 for CD-ROM). Another reference is the Healthy People 2010 Final Review—2001.

For one free copy of the Healthy People 2010, contact: The National Center for Health Statistics, Division of Data Services, 3311 Toledo Road, Hyattsville, MD 20782, or by telephone at (301) 458-4636. Ask for HHS Publication No. (PHS) 99-1256. This document may also be downloaded from: <http://www.healthypeople.gov>.

3. Definitions

For purposes of this announcement, the following definitions apply:

Minority Populations—American Indian or Alaska Native; Asian; Black or African American; Hispanic or Latino; and Native Hawaiian or Other Pacific Islander (42 U.S.C. 300u-6, section 1707 of the Public Health Service Act, as amended.)

Multicultural Partnerships—Multicultural, multi-racial, and multi-ethnic entities comprising organizations and individuals that have come together for a common purpose and that function independently on behalf of the partnership's members to address health disparities within communities of color.

State and Territorial Office of Minority Health—An entity formally established by Executive Order, statute, or a state health officer to improve the health of racial and ethnic populations.

Systems Change—An effort to ensure that the resources and infrastructure necessary are available and accessible to address minority health and health disparities as well as the public health and health care needs of the American population in general. Structural and functional components of the system must also be present—components such as information, data, and evaluation capabilities; trained, motivated, and culturally/linguistically appropriate staff; and facilities, equipment, and technologies appropriate for the needs of public health/health care professionals and the people they serve.

Dated: June 5, 2007.

Garth N. Graham,

Deputy Assistant Secretary for Minority Health.

[FR Doc. 07-2893 Filed 6-8-07; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

Findings of Research Misconduct

AGENCY: Office of the Secretary, HHS.

ACTION: Notice.

SUMMARY: Notice is hereby given that the Office of Research Integrity (ORI) and the Assistant Secretary for Health have taken final action in the following case:

Wei Jin, Colorado State University: Based on an investigation conducted by Colorado State University (CSU) and additional analysis and information obtained by the Office of Research Integrity during its oversight review, the U.S. Public Health Service (PHS) found that Mr. Wei Jin, former doctoral candidate, Department of Chemistry, CSU, engaged in research misconduct in research funded by National Cancer Institutes (NCI), National Institutes of Health (NIH), grant R01 CA85419.

Specifically, Mr. Jin falsified data/results by claiming he had performed a novel total synthesis of renieramycin G, when in fact, he obtained renieramycin G through a relatively simple reaction sequence from renieramycin M, a natural product that was a gift to the laboratory and that had been isolated by others from the Thai sponge. Mr. Jin included the falsified data/results in:

- His research notebooks and other records of his research;
- His dissertation, "Asymmetric total synthesis of (–)-Reineramycin G and studies toward the total synthesis of Ecteinasidin-743";
- A manuscript, Jin, W. & Williams, R., "Asymmetric total synthesis of (–)-Renieramycin G," accepted by the *Journal of the American Chemical Society*; and
- Supplemental information relative to the manuscript to be published online.

ORI has implemented the following administrative actions for a period of three (3) years, beginning on May 8, 2007:

(1) Mr. Jin is debarred from eligibility for any contracting or subcontracting with any agency of the United States Government and from eligibility or involvement in nonprocurement programs of the United States Government referred to as "covered transactions" as defined in HHS' implementation of OMB Guidelines to Agencies on Government-wide Debarment and Suspension at 2 CFR Part 376, et seq.; and

(2) Mr. Jin is prohibited from serving in any advisory capacity to PHS,

including but not limited to service on any PHS advisory committee, board, and/or peer review committee, or as a consultant.

FOR FURTHER INFORMATION CONTACT:

Director, Division of Investigative Oversight, Office of Research Integrity, 1101 Wootton Parkway, Suite 750, Rockville, MD 20852, (240) 453-8800.

John Dahlberg,

Acting Director, Office of Research Integrity.

[FR Doc. 07-2866 Filed 6-8-07; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

Request for Notification From Industry Organizations Interested in Participating in Selection Process for Nonvoting Industry Representatives on Food Safety Public Advisory Committee and Request for Nominations for Nonvoting Industry Representatives on Food Safety Public Advisory Committee

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is requesting that any industry organizations interested in participating in the selection of nonvoting industry representatives to serve on its Food Advisory Committee for the Center for Food Safety and Applied Nutrition (CFSAN) notify FDA in writing. A nominee may either be self-nominated or nominated by an organization to serve as a nonvoting industry representative. Nominations will be accepted for current vacancies effective with this notice.

DATES: Any industry organization interested in participating in the selection of an appropriate nonvoting member to represent industry interests must send a letter stating that interest to the FDA by July 11, 2007, for vacancies listed in this notice. Concurrently, nomination materials for prospective candidates should be sent to FDA by July 11, 2007.

ADDRESSES: All letters of interest and nominations should be submitted in writing to Carolyn Jeletic (see **FOR FURTHER INFORMATION CONTACT**).

FOR FURTHER INFORMATION CONTACT:

Carolyn Jeletic, Center for Food Safety and Applied Nutrition; Office of Regulations, Policy, and Social Sciences (HFS-24); Food and Drug Administration, 5100 Paint Branch

Pkwy., College Park, MD 20740; 301-436-1719; carolyn.jeletic@fda.hhs.gov.

SUPPLEMENTARY INFORMATION: The agency intends to add nonvoting industry representative to its advisory committee identified below:

I. CFSAN Food Advisory Committee

The Committee shall provide advice primarily to Commissioner of Food and Drugs and other appropriate officials, on emerging food safety, food science, nutrition, and other food-related health issues that the FDA considers of primary importance for its food and cosmetics programs. The Committee may be charged with reviewing and evaluating available data and making recommendations on the following matters, such as those relating to: (1) Broad scientific and technical food or cosmetic related issues, (2) the safety of new foods and food ingredients, (3) labeling of foods and cosmetics, (4) nutrient needs and nutritional adequacy, and (5) safe exposure limits for food contaminants. The Committee may also be asked to provide advice and make recommendations on ways of communicating to the public the potential risks associated with these issues and on approaches that might be considered for addressing the issues.

II. Selection Procedure

Any industry organization interested in participating in the selection of an appropriate nonvoting member to represent industry interests should send a letter stating that interest to the FDA contact (see **FOR FURTHER INFORMATION CONTACT**) within 30 days of publication of this document. Within the subsequent 30 days, FDA will send a letter to each organization that has expressed an interest, attaching a complete list of all such organizations; and a list of all nominees along with their current resumes. The letter will also state that it is the responsibility of the interested organizations to confer with one another and to select a candidate, within 60 days after the receipt of the FDA letter, to serve as the nonvoting member to represent industry interests for a particular committee. The interested organizations are not bound by the list of nominees in selecting a candidate. However, if no individual is

selected within 60 days, the Commissioner of Food and Drugs will select the nonvoting member to represent industry interests.

III. Application Procedure

Individuals may self nominate and/or an organization may nominate on one or more individuals to serve as a nonvoting industry representative. A current curriculum vitae and the name of the committee of interest should be sent to the FDA contact person within the 30 days. FDA will forward all nominations to the organizations expressing interest in participating in the selection process for the committee. (Persons who nominate themselves as nonvoting industry representatives will not participate in the selection process).

FDA has a special interest in ensuring that women, minority groups, individuals with physical disabilities, and small businesses are adequately represented on its advisory committees, and therefore, encourages, nominations for appropriately qualified candidates from these groups. Specifically, in this document, nominations for nonvoting representatives of industry interests are encouraged from the food production and manufacturing industry, the dietary supplement manufacturing industry, the agricultural biotechnology manufacturing industry.

This notice is issued under the Federal Advisory Committee Act (5 U.S.C. app. 2) and 21 CFR part 14, relating to advisory committees.

Dated: June 4, 2007.

Randall W. Lutter,

Associate Commissioner for Policy and Planning.

[FR Doc. E7-11141 Filed 6-8-07; 8:45 am]

BILLING CODE 4160-01-S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Submission for OMB Review; Comment Request

Periodically, the Health Resources and Services Administration (HRSA)

publishes abstracts of information collection requests under review by the Office of Management and Budget (OMB), in compliance with the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35). To request a copy of the clearance requests submitted to OMB for review, call the HRSA Reports Clearance Office on (301)-443-1129.

The following request has been submitted to the Office of Management and Budget for review under the Paperwork Reduction Act of 1995:

Proposed Project: The Health Center Program Application Forms: (OMB No. 0915-0285 Extension)

Health centers receiving grant funding under Section 330 of the Public Health Service (PHS) Act are a major component of America's health care safety net, the Nation's "system" of providing primary health care to underserved communities and vulnerable populations. Health centers care for people regardless of their ability to pay and whether or not they have health insurance. They provide primary health care, as well as services such as transportation and translation. Many health centers also offer dental, mental health, and substance abuse care. Grants to health centers are administered by HRSA's Bureau of Primary Health Care (BPHC). In an effort to encourage the creation of new health centers and sites as well as improve and strengthen existing sites, HRSA periodically issues new grant opportunities.

HRSA uses the following application forms to administer and manage the Federal Qualified Health Center. These application forms are used by new and existing FQHC's to apply for grant and non-grant opportunities, re-new their grant or non-grant opportunities or change their scope of project.

Estimates of annualized reporting burden are as follows:

Type of application form	Number of respondents	Responses per respondent	Total responses	Hours per response	Total burden hours
General Information Worksheet	1,021	1	1,021	3.0	3,063
P12 Planning General Information Worksheet	300	1	300	12.0	3,600
BPHC Funding Request Summary	1,021	1	1,021	0.5	510.5
Proposed Staff Profile	1,021	1	1,021	6.0	6,126
Income Analysis Form	1,021	1	1,021	15.0	15,315
Community Characteristics	1,021	1	1,021	12.0	12,252