

with an affinity for CD47 for the preservation or resuscitation of organs and tissues for transplantation"; (2) "the use of antibodies including humanized antibodies reacting with CD47 or related antigens, precursors, or molecules, and isolated and/or recombinant fragments, and conjugates with an affinity for CD47 for treating or preventing vascular diseases, including but not limited to, pulmonary hypertension, sickle cell disease, myocardial infarction, stroke, and tissue ischemia resulting from trauma and surgical procedures"; (3) "the use of antisense oligonucleotides or RNA formulations of stabilized composition to reduce expression of CD47 for treating wounds and/or burns and for use in reconstructive surgery"; and (4) "use of small molecules antagonists of CD47 for treating or preventing vascular diseases including, but not limited to, thrombosis, hypertension, peripheral artery disease, renal artery disease, and ischemia resulting from atherosclerosis" to Vasculox, Inc., having an office in at least St. Louis, Missouri, U.S.A. The patent rights in these inventions have been assigned to the United States of America.

DATES: Only written comments and/or applications for a license which are received by the NIH Office of Technology Transfer on or before September 15, 2009 will be considered.

ADDRESSES: Requests for copies of the patent application, inquiries, comments, and other materials relating to the contemplated exclusive license should be directed to: Charlene A. Sydnor, Ph.D., Licensing and Patenting Manager, Office of Technology Transfer, National Institutes of Health, 6011 Executive Boulevard, Suite 325, Rockville, MD 20852-3804; Telephone: (301) 435-4689; Facsimile: (301) 402-0220; E-mail: sydnorc@mail.nih.gov.

SUPPLEMENTARY INFORMATION: Nitric Oxide (NO) plays an important role as a major intrinsic vasodilator, and increases blood flow to tissues and organs. Disruption of this process leads to peripheral vascular disease, ischemic heart disease, stroke, diabetes and many more significant diseases. The inventors have discovered that the matrix protein thrombospondin1 (TSP1) blocks the beneficial effects of NO, and prevents it from dilating blood vessels and increasing blood flow to organs and tissues. Additionally, they discovered that this regulation requires TSP1 interaction with its cell receptor, CD47. Relief of this inhibition in genetically altered mice lacking either TSP1 or CD47 results in dramatically improved blood flow and increased tissue

oxygenation. Further, by using reagents such as monoclonal antibodies and peptides that block TSP1-CD47 interaction, or agents such as antisense oligonucleotides or morpholinos that reduce the level of CD47 or TSP1, blood flow can dramatically increase to ischemic tissues in vivo. Inhibition of TSP1 signaling at the level of CD47 expression and/or activation significantly improves the survival of tissue in an ischemic environment.

The prospective exclusive license will be royalty bearing and will comply with the terms and conditions of 35 U.S.C. 209 and 37 CFR part 404.7. The prospective exclusive license may be granted unless within sixty (60) days from the date of this published notice, the NIH receives written evidence and argument that establishes that the grant of the license would not be consistent with the requirements of 35 U.S.C. 209 and 37 CFR part 404.7.

Applications for a license in the field of use filed in response to this notice will be treated as objections to the grant of the contemplated exclusive license. Comments and objections submitted to this notice will not be made available for public inspection and, to the extent permitted by law, will not be released under the Freedom of Information Act, 5 U.S.C. 552.

Dated: July 10, 2009.

Richard U. Rodriguez,

Director, Division of Technology Development and Transfer, Office of Technology Transfer, National Institutes of Health.

[FR Doc. E9-17038 Filed 7-16-09; 8:45 am]

BILLING CODE 4140-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Section 330A(e) of the Public Health Service Act, as Amended (42 U.S.C. 254c(e)) and Section 317(k)(2) of the Public Health Service Act, as Amended (42 U.S.C. 247b(k)(2))

AGENCY: Health Resources and Services Administration, HHS.

ACTION: Notice of Single Source Grant Award to Lincoln County Health Department in Libby, MT.

SUMMARY: The Health Resources and Services Administration (HRSA) is issuing a new single source award through the Rural Health Care Services Outreach Grant Program and the Centers for Disease Control and Prevention's (CDC) screening grant program authority to Lincoln County Health Department

(LCHD) in Libby, Montana. A serious public health problem has been identified in Lincoln County, Montana, as residents in this rural community have been adversely affected by the asbestos released from a vermiculite mine. The asbestos-related diseases in which Lincoln County residents have been diagnosed include asbestosis, lung cancer, mesothelioma, and others. The purpose of this demonstration grant would be to provide care management for Lincoln County residents with asbestos-related diseases. The grant will provide funds to support the coordination and payment of care for asbestos-related diseases among such entities as hospitals, clinics, specialty care providers, and others involved in the care and treatment of this service population.

SUPPLEMENTARY INFORMATION:

Intended Recipient of the Award: Lincoln County Health Department in Libby, Montana.

Amount of the Award FY 2009: It is anticipated that up to \$6,000,000 will be available from all sources for a 2-year project period from August 1, 2009—July 31, 2011. Of the \$6,000,000, \$2,000,000 will be available from CDC to support this effort. The remaining \$4,000,000 will be awarded by HRSA's Office of Rural Health Policy's Rural Health Care Services Outreach Program, of which \$2,000,000 will be provided the first year and an additional \$2,000,000 will be provided the second year. Funding beyond the first year, however, is dependent on the availability of appropriated funds, grantee satisfactory performance, and a decision that continued funding is in the best interest of the Federal Government.

Project Period: The project period for this grant is August 1, 2009, through July 31, 2011.

Authority: This activity is funded under the authority of HRSA's Rural Health Care Services Outreach Program, statutory authority Section 330A(e) of the Public Health Service Act, as amended (42 U.S.C. 254c(e)); and the CDC's statutory authority Section 317(k)(2) of the Public Health Service Act, as amended (42 U.S.C. 247b(k)(2)). The authority for the single source award is HHS Grants Policy Directive 2.04, Awarding Grants.

Catalogue of Federal Domestic Assistance Number: HRSA's Rural Health Care Services Outreach Grant: 93.912. CDC Screening Program: 93.161.

Justification for Single Source Awards: Because of the serious public health problem in Lincoln County, Montana, and the prevalence of

asbestos-related diseases among the residents, their health is at risk of being severely impaired by lack of essential screening and related medical treatment. Due to the urgency of the situation, HRSA cannot run a full or limited competition since this process would take approximately 290 days.

LCHD has been identified as uniquely qualified for undertaking this activity. LCHD has the requisite administrative and medical infrastructure as well as prior experience with screening and coordinating treatment with other local health care providers. In addition, tracking of disease incidents is a necessary component of the award activity and LCHD has previously worked with the Montana Department of Public Health and Human Services in developing and maintaining their asbestos-related disease registry. LCHD is in a unique position to immediately undertake and coordinate the award activities necessary to address this urgent public health problem and in a manner minimizing adverse health outcomes that might otherwise result from an extended delay in providing such services.

FOR FURTHER INFORMATION CONTACT: Tom Morris, Associate Administrator, Office of Rural Health Policy, Health Resources and Services Administration, 5600 Fishers Lane, Rockville, MD 20857; phone 301-443-0835; tmorris@hrsa.gov.

Dated: July 10, 2009.

Mary K. Wakefield,
Administrator.

[FR Doc. E9-16959 Filed 7-16-09; 8:45 am]

BILLING CODE 4165-15-P

DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency

[Docket ID: FEMA-2009-0001]

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

AGENCY: Federal Emergency Management Agency, DHS.

ACTION: Notice; 30-day notice and request for comments; new information collection; OMB No. 1660-NW35; FEMA Form 528-1, NEFRLS Registration; and FEMA Form 528-2, NEFRLS Search.

SUMMARY: The Federal Emergency Management Agency (FEMA) has submitted the information collection abstracted below to the Office of Management and Budget for review and

clearance in accordance with the requirements of the Paperwork Reduction Act of 1995. The submission describes the nature of the information collection, the categories of respondents, the estimated burden (*i.e.*, the time, effort and resources used by respondents to respond) and cost, and includes the actual data collection instruments FEMA will use.

DATES: Comments must be submitted on or before August 17, 2009.

ADDRESSES: Submit written comments on the proposed information collection to the Office of Information and Regulatory Affairs, Office of Management and Budget. Comments should be addressed to the Desk Officer for the Department of Homeland Security, Federal Emergency Management Agency, and sent via electronic mail to oir.submission@omb.eop.gov or faxed to (202) 395-5806.

FOR FURTHER INFORMATION CONTACT: Requests for additional information or copies of the information collection should be made to Director, Records Management Division, 1800 South Bell Street, Arlington, VA 20598-3005, facsimile number (202) 646-3347, or e-mail address FEMA-Information-Collections@dhs.gov.

SUPPLEMENTARY INFORMATION:

Collection of Information

Title: National Emergency Family Registry and Locator System (NEFRLS).

Type of information collection: New information collection.

OMB Number: 1660-NW35.

Form Titles and Numbers: FEMA Form 528-1, NEFRLS Registration; and FEMA Form 528-2, NEFRLS Search.

Abstract: NEFRLS is a Web-based system. The information collected in the NEFRLS will be used to help facilitate the reunification of family members that have been displaced due to a major disaster or emergency.

Affected Public: Individuals or households.

Estimated Number of Respondents: 446,648.

Frequency of Response: On Occasion.

Estimated Average Hour Burden per Respondent: .74 Hours.

Estimated Total Annual Burden Hours: 328,366.

Estimated Cost: There is no start-up, operational or other costs associated with this information collection.

Dated: July 10, 2009.

Larry Gray,

Director, Records Management Division,
Office of Management, Federal Emergency
Management Agency, Department of
Homeland Security.

[FR Doc. E9-17068 Filed 7-16-09; 8:45 am]

BILLING CODE 9111-23-P

DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency

[Docket ID: FEMA-2009-0001]

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Federal Emergency Management Agency, DHS.

ACTION: Notice; 60-day notice and request for comments; revision of a currently approved information collection; OMB No. 1660-0085; No Form.

SUMMARY: The Federal Emergency Management Agency, 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 a proposed revision of a currently approved information collection. In accordance with the Paperwork Reduction Act of 1995, this Notice seeks comments concerning the Crisis Counseling Assistance and Training Program for Immediate Services which provides funding in response to a State's request for crisis counseling services for a Presidentially-declared disaster.

DATES: Comments must be submitted on or before September 15, 2009.

ADDRESSES: To avoid duplicate submissions to the docket, please use only one of the following means to submit comments:

(1) *Online.* Submit comments at <http://www.regulations.gov> under docket ID FEMA-2009-0001. Follow the instructions for submitting comments.

(2) *Mail.* Submit written comments to Office of Chief Counsel, Regulation and Policy Team, DHS/FEMA, 500 C Street, SW., Room 835, WASH, DC 20472-3100.

(3) *Facsimile.* Submit comments to (703) 483-2999.

(4) *E-mail.* Submit comments to FEMA-POLICY@dhs.gov. Include docket ID FEMA-2009-0001 in the subject line.

All submissions received must include the agency name and docket ID. Regardless of the method used for