cgi?P1_Prod_Version=ShockwaveFlash. Installation questions or troubleshooting help can be found at the same link. For optimal viewing, a high speed Internet connection is recommended. The Community Banking Advisory Committee meeting videos are made available on-demand approximately two weeks after the event.

Dated: September 23, 2009.

Robert E. Feldman,

Committee Management Officer,

Federal Deposit Insurance Corporation.

[FR Doc. E9–23298 Filed 9–25–09; 8:45 am]

BILLING CODE 6714–01–P

FEDERAL RESERVE SYSTEM

Change in Bank Control Notices; Acquisition of Shares of Bank or Bank Holding Companies

The notificants listed below have applied under the Change in Bank Control Act (12 U.S.C. 1817(j)) and § 225.41 of the Board's Regulation Y (12 CFR 225.41) to acquire a bank or bank holding company. The factors that are considered in acting on the notices are set forth in paragraph 7 of the Act (12 U.S.C. 1817(j)(7)).

The notices are available for immediate inspection at the Federal Reserve Bank indicated. The notices also will be available for inspection at the office of the Board of Governors. Interested persons may express their views in writing to the Reserve Bank indicated for that notice or to the offices of the Board of Governors. Comments must be received not later than October 13, 2009.

A. Federal Reserve Bank of San Francisco (Kenneth Binning, Vice President, Applications and Enforcement) 101 Market Street, San Francisco, California 94105–1579:

1. Alma Medina Vivar, Daly City, California; as part of a group acting in concert including Rommel and Ruell Medina, to individually acquire, and to collectively acquire, voting shares of MNB Holdings, Inc., and thereby indirectly acquire voting shares of Mission National Bank, both of San Francisco, California.

Board of Governors of the Federal Reserve System, September 23, 2009.

Robert deV. Frierson,

Deputy Secretary of the Board.

[FR Doc. E9–23356 Filed 9–25–09; 8:45 am]

BILLING CODE 6210–01–S

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 applications 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 website at *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 October 23, 2009.

A. Federal Reserve Bank of Richmond (A. Linwood Gill, III, Vice President) 701 East Byrd Street, Richmond, Virginia 23261–4528:

1. Nantahala Bancshares, Inc., Franklin, North Carolina; to become a bank holding company by acquiring 100 percent of the voting shares of Nantahala Bank & Trust Company, Franklin, North Carolina.

Board of Governors of the Federal Reserve System, September 23, 2009.

Robert deV. Frierson,

Deputy Secretary of the Board.

[FR Doc. E9–23357 Filed 9–25–09; 8:45 am]

BILLING CODE 6210–01–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30 Day–09–09CC]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call the CDC Reports Clearance Officer at (404) 639–5960 or send an e-mail to *omb@cdc.gov.* Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395–5806. Written comments should be received within 30 days of this notice.

Proposed Project

CDC American Recovery and Reinvestment Act of 2009 (ARRA) Performance Progress Report—New—Office of the Chief Operating Officer (OCOO), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The American Recovery and Reinvestment Act of 2009 was signed into law on February 17, 2009, Public Law 111–5 (''Recovery Act''). The purpose of this proposed data collection is to collect quarterly performance information for all CDC grants and cooperative agreements funded under the Recovery Act. This will allow CDC to receive reports on recipient performance measures as set forth in the applicable Funding Opportunity Announcement (FOA) and Notice of Grant Award. This requirement is in addition to the reporting requirements of Section 1512 of the Recovery Act, set forth by the Office of Management and Budget (OMB) under the data collection instrument titled ''Standard Data Elements for Reports under Section 1512 of the American Recovery and Reinvestment Act of 2009, Public Law 111–5 (Grants, Cooperative Agreements and Loans).''

The form CDC proposes to use is a modified Performance Progress Report (SF–PPR) which was successfully piloted by the Administration for Children and Families (ACF). CDC intends to use this modified form for quarterly standard reporting of performance measures set forth in the applicable FOA and Notice of Grant Award for all CDC Recovery Act funded

grants and cooperative agreements. In addition to allowing for uniformity of information collection, this format will support systematic electronic collection and submission of information. The form contains non-personal identifying data elements and a section for a performance narrative.

There are no costs to respondents other than their time. The total estimated annual burden hours are 11,676. This estimate reflects an increase from the 60 day notice as a result of an increase in respondents and adjustments to average burden hours.

ESTIMATED ANNUALIZED BURDEN HOURS

Respondents	Number of respondents (estimated)	Number of responses per respondent	Average burden per response (in hours)	Total burden (in hours)
States: Section 317 Immunization Program—Reaching More Children & Adults	64	4	6	1,536
States: Section 317 Immunization Program—Innovative Initiatives	15	4	6	360
States: Section 317 Immunization Program—Communication & Provider Education	10	4	6	240
States: Section 317 Immunization Program—Strengthening the Evidence Base	64	4	6	1,536
States: Healthcare Associated Infections—Emerging Infections Program	10	4	6	240
States: Healthcare Associated Infections—Epidemiology & Laboratory Capacity	52	4	6	1,248
States: Health Information Technology and Public Health	64	4	6	1,536
Universities: Health Information Technology Professionals in Health Care	30	4	6	720
States: Communities Putting Prevention to Work—Quitline Support	50	4	2	400
States: Communities Putting Prevention to Work—Policy Activities	50	4	2	400
States: Communities Putting Prevention to Work—Policy Implementation	50	2	1	100
States: Communities Putting Prevention to Work—Community Policy Activities	40	4	16	2,560
Communities: Communities Putting Prevention to Work—Policy Implementation	40	2	8	640
State Cancer Registries: Comparative Effectiveness Research to Enhance Cancer Registry Data Systems	15	4	2	120
Universities: Comparative Effectiveness Research to Improve Prevention and Wellness	5	4	2	40

Dated: September 21, 2009.

Maryam I. Daneshvar,

Acting Reports Clearance Officer, Centers for Disease Control and Prevention.

[FR Doc. E9–23311 Filed 9–25–09; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30 Day–09–07AA]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call Maryam I. Daneshvar, the CDC Reports Clearance Officer, at (404) 639–5960 or send an e-mail to *omb@cdc.gov.* Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395–5806. Written comments should be received within 30 days of this notice.

Proposed Project

Evaluating the Quality of Interview Data Collected by Teratology Information Services About Pregnancy Outcomes, Maternal and Infant Health, Following Medication Use During Pregnancy and Lactation—New—National Center on Birth Defects and Developmental Disabilities (NCBDDD), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

This data collection is based on the following components of the Public Health Service Act: (1) Act 42 USC 241, Section 301, which authorizes ''research, investigations, experiments, demonstrations, and studies relating to the causes, diagnosis, treatment, control, and prevention of physical and mental diseases and impairments of man.'' (2) 42 USC 247b–4, Section 317 C, which authorizes the activities of the National Center on Birth Defects and Developmental Disabilities. This section was created by Public Law 106–310, also known as ''the Children's Health Act of 2000.'' This portion of the code has also been amended by Public Law 108–154, which is also known as the ''Birth Defects and Developmental Disabilities Prevention Act of 2003''.

The use of a number of medications during pregnancy is known to be associated with serious adverse effects in children. However, because pregnant and lactating women are traditionally excluded from clinical trials, and because premarketing animal studies do not necessarily predict the experience of humans, little information is available about the safety of most prescription medications during pregnancy and lactation at the time they are marketed. Nevertheless, many women inadvertently use medications early in gestation before realizing they are pregnant, and many maternal conditions require treatment during pregnancy and breastfeeding to safeguard the health of both mother and infant. Currently, the United States does not does not conduct comprehensive monitoring for pregnancy or infant outcomes related to medication exposures. To try to address these concerns, a number of pharmaceutical manufacturers have established pregnancy drug registries to monitor the effects of use of selected medications during pregnancy on pregnancy outcomes and fetal and infant health. In some instances, the U.S. Food and Drug Administration has required postmarketing monitoring of pregnancy outcomes after medication