The fabricated abstract was not submitted and has not been published or used in any grant applications.

FOR FURTHER INFORMATION CONTACT: Acting Director, Division of Research Investigations, Office of Research Integrity, 5515 Security Lane, Suite 700, Rockville, MD 20852 (301) 443–5330.

Chris B. Pascal,

Acting Director, Office of Research Integrity.

[FR Doc. 96–30637 Filed 11–29–96; 8:45 am]

BILLING CODE 4160–17–P

Administration for Children and Families

Federal Allotments to States for Social Services Expenditures, Pursuant to Title XX, Block Grants to States for Social Services; Promulgation for Fiscal Year 1998

AGENCY: Administration for Children and Families, Department of Health and Human Services.

ACTION: Notification of allocation of title XX—social services block grant allotments for fiscal year 1998.

SUMMARY: This issuance sets forth the individual allotments to States for Fiscal Year 1998, pursuant to title XX of the Social Security Act, as amended (Act). The allotments to the States published herein are based upon the authorization set forth in section 2003 of the Act and are contingent upon Congressional appropriations for the fiscal year. If Congress enacts and the President approves an amount different from the authorization, the allotments will be adjusted proportionately.

FOR FURTHER INFORMATION CONTACT: Frank A. Burns, (202) 401–5536.

SUPPLEMENTARY INFORMATION: Section 2003 of the Act authorizes $2.380 billion for Fiscal Year 1998 and provides that it be allocated as follows:

(1) Puerto Rico, Guam, the Virgin Islands, and the Northern Mariana Islands each receives an amount which bears the same ratio to $2.380 billion as its allocation for Fiscal Year 1981 bore to $2.9 billion.

(2) American Samoa receives an amount which bears the same ratio to the amount allotted to the Northern Mariana Islands as the population of American Samoa bears to the population of the Northern Mariana Islands determined on the basis of the most recent data available at the time such allotment is determined.

(3) The remainder of the $2.380 billion is allotted to each State in the same proportion as that State's population is to the population of all States, based upon the most recent data available from the Department of Commerce.

For Fiscal Year 1998, the allotments are based upon the Bureau of Census population statistics contained in its report ''Population of States by Broad Age Groups and Sex: 1990 and 1995 (CB96–88, Table 4) released May 31, 1996, and ''1990 Census of Population and Housing'' (CPH–6–AS and CPH–6–CNMI) published April 1992, which are the most recent data available from the Department of Commerce at this time as to the population of each State and each Territory.

EFFECTIVE DATE: The allotments shall be effective October 1, 1997.

FISCAL YEAR 1998 FEDERAL ALLOTMENTS TO STATES FOR SOCIAL SERVICES—TITLE XX BLOCK GRANTS

Alabama	$38,307,808
Alaska	5,440,375
American Samoa	88,560
Arizona	37,992,554
Arkansas	22,373,994
California	284,529,822
Colorado	33,750,142
Connecticut	29,498,723
Delaware	6,458,194
Dist. of Col	4,990,013
Florida	127,596,615
Georgia	64,861,162
Guam	410,345
Hawaii	10,691,598
Idaho	10,475,425
Illinois	106,555,694
Indiana	52,269,036
Iowa	25,598,587
Kansas	23,103,580
Kentucky	34,767,961
Louisiana	39,109,452
Maine	11,177,990
Maryland	45,423,530
Massachusetts	54,709,999
Michigan	86,010,171
Minnesota	41,523,394
Mississippi	24,292,536
Missouri	47,954,566
Montana	7,836,302
Nebraska	14,744,858
Nevada	13,781,083
New Hampshire	10,340,316
New Jersey	71,562,552
New Mexico	15,177,206
New York	163,355,373
North Carolina	64,807,119
North Dakota	5,773,643
No. Mariana Islands	82,069
Ohio	100,439,775
Oklahoma	29,525,745
Oregon	28,291,753
Pennsylvania	108,735,447
Puerto Rico	12,310,345
Rhode Island	8,917,171
South Carolina	33,083,606
South Dakota	6,566,281
Tennessee	47,342,073
Texas	168,651,632
Utah	17,573,133
Vermont	5,269,238
Virgin Islands	410,345
Virginia	59,609,939
Washington	48,918,341
West Virginia	16,465,242
Wisconsin	46,144,110
Wyoming	4,323,477
Total	$2,380,000,000

Dated: November 26, 1996.

Donald Sykes,

Director, Office of Community Services.

[FR Doc. 96–30603 Filed 11–29–96; 8:45 am]

BILLING CODE 4184–01–P

Food and Drug Administration

[Docket No. 96M–0447]

UroMed Corp.; Premarket Approval of Reliance® Urinary Control Insert and Sizing Device

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing its approval of the application by UroMed Corp., Needham, MA, for premarket approval, under the Federal Food, Drug, and Cosmetic Act (the act), of the Reliance® Urinary Control Insert and Sizing Device. After reviewing the recommendation of the Gastroenterology and Urology Devices Advisory Panel, FDA's Center for Devices and Radiological Health (CDRH) notified the applicant, by letter of August 16, 1996, of the approval of the application.

DATES: Petitions for administrative review by January 2, 1997.

ADDRESSES: Written requests for copies of the summary of safety and effectiveness data and petitions for administrative review to the Dockets Management Branch (HFA–305), Food and Drug Administration, 12420 Parklawn Dr., rm. 1–23, Rockville, MD 20857.

FOR FURTHER INFORMATION CONTACT: Venkat Rao Nimmagadda, Center for Devices and Radiological Health (HFZ–470), Food and Drug Administration, 9200 Corporate Blvd., Rockville, MD 20850, 301–594–2194.

SUPPLEMENTARY INFORMATION: On August 18, 1995, UroMed Corp., Needham, MA 02194, submitted to CDRH an application for premarket approval of the Reliance® Urinary Control Insert and Sizing Device. The device is a

transurethral female urinary occlusion device and is intended for use in the management of stress urinary incontinence in adult women.

On July 25, 1996, the Gastroenterology and Urology Devices Panel of the Medical Devices Advisory Committee, an FDA advisory committee, reviewed and recommended approval of the application. On August 16, 1996, CDRH approved the application by a letter to the applicant from the Director of the Office of Device Evaluation, CDRH.

A summary of the safety and effectiveness data on which CDRH based its approval is on file in the Dockets Management Branch (address above) and is available from that office upon written request. Requests should be identified with the name of the device and the docket number found in brackets in the heading of this document.

Opportunity for Administrative Review

Section 515(d)(3) of the act (21 U.S.C. 360e(d)(3)) authorizes any interested person to petition, under section 515(g) of the act, for administrative review of CDRH's decision to approve this application. A petitioner may request either a formal hearing under 21 CFR part 12 of FDA's administrative practices and procedures regulations or a review of the application and CDRH's action by an independent advisory committee of experts. A petition is to be in the form of a petition for reconsideration under 21 CFR 10.33(b). A petitioner shall identify the form of review requested (hearing or independent advisory committee) and shall submit with the petition supporting data and information showing that there is a genuine and substantial issue of material fact for resolution through administrative review. After reviewing the petition, FDA will decide whether to grant or deny the petition and will publish a notice of its decision in the Federal Register. If FDA grants the petition, the notice will state the issue to be reviewed, the form of the review to be used, the persons who may participate in the review, the time and place where the review will occur, and other details.

Petitioners may, at any time on or before January 2, 1997, file with the Dockets Management Branch (address above) two copies of each petition and supporting data and information, identified with the name of the device and the docket number found in brackets in the heading of this document. Received petitions may be seen in the office above between 9 a.m. and 4 p.m., Monday through Friday.

This notice is issued under the Federal Food, Drug, and Cosmetic Act (secs. 515(d), 520(h) (21 U.S.C. 360e(d), 360j(h))) and under authority delegated to the Commissioner of Food and Drugs (21 CFR 5.10) and redelegated to the Director, Center for Devices and Radiological Health (21 CFR 5.53).

Dated: October 24, 1996.

Joseph A. Levitt,

Deputy Director for Regulations Policy, Center for Devices and Radiological Health.

[FR Doc. 96–30649 Filed 11–29–96; 8:45 am]

BILLING CODE 4160–01–F

Health Resources and Service Administration

Agency Information Collection Activities: Proposed Collection: Comment Request

In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, the Health Resources and Services Administration (HRSA) will publish periodic summaries of proposed projects being developed for submission to OMB under the Paperwork Reduction Act of 1995. To request more information on the proposed project or to obtain a copy of the data collection plans and draft instruments, call the HRSA Reports Clearance Officer on (301) 443–1129.

Comments are invited on: (a) Whether the proposed 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 proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology.

Proposed Projects

1. Application for Certification as a Federally Qualified Health Center (FQHC)(OMB No.0915–0142)—Extension, No Change

The Federally Qualified Health Center (FQHC) Look-Alike application package (OMB No. 0915–0142) was developed to certify entities as FQHC providers under Medicaid and Medicare. FQHCs receive reasonable cost-related reimbursement under Medicaid and Medicare for a full range of primary health care services. The application for FQHC certification is divided into four components: (1) Need and Community Impact, (2) Health Services, (3) Management and Finance, and (4) Governance. Certified FQHC Look-Alikes must submit an annual recertification document with updated exhibits to retain designation as an FQHC.

In an effort to improve the procedures for certifying FQHCs, HRSA is considering revising the FQHC Look-Alike application (with parallel changes made to the recertification requirements). The revised version would update the application guidelines and exhibits to reflect current law, regulations, and practice. A revised application may also include more specific guidance on how applicants should document existing unmet need in the community.

These revisions will be developed during the next year. In the interim, a request for a two-year extension of OMB approval of the current form will be submitted.

ESTIMATES OF ANNUALIZED HOUR BURDEN

Form name	Number of respondents	Responses per respondent	Hours per response	Total burden hours
Application	40	1	120	4,800
Recertification	213	1	20	4,260
Total Burden	253	1	35.8	9,060