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Trans No.	Acquiring	Acquired	Entities	
20071704	Wells Fargo & Company	Breater Bay Bancorp	ABD Financial Services, Inc. ABD Insurance and Financial Services. Lucini/Parish Insurance, Inc.	
20071706	Sonic Healthcare Limited	Lawrence Siedlick	Sunrise Medical Laboratories.	
20071707	Sonic Healthcare Limited	Patricia Lanza	Sunrise Medical Laboratories.	
20071711	The Bear Stearns Companies Inc	Universal American Financial Corp.	Universal American Financial Corp.	
20071719	The Estee Lauder Companies Inc	Ojon Corporation	Ojon Corporation.	
Transactions Granted Early Termination—07/17/2007				
20071684	Thomas & Betts Corporation	Danaher Corporation	Danaher Power Solutions, LLC. Danaher UK Industries Limited. Fisher Pierce Co. Jennings Technology Company, LLC. Joslyn Canada. Josyln Hi-Voltage Company, LLC. Joslyn Holding Company. Royce Thompson Limited.	
20071691	Madison Dearborn Capital Part- ners V-A, L.P.	Nuveen Investments, Inc	Nuveen Investments, Inc.	
Transactions Granted Early Termination—07/18/2007				
20071341	BAE Systems plc	Armor Holdings, Inc	Armor Holdings, Inc.	
20071636	Empeiria Conner LLC	Besser Company	Aggregate Plant Products Company.	
Transactions Granted Early Termination—07/19/2007				
20071681	RFS Holdings V.V	ABN Amro Holdings N.V	ABN Amro Holdings N.V.	
20071763	Walgreen Co	Option Care, Inc	Option Care, Inc.	
Transactions Granted Early Termination—07/20/2007				
20071715	Intercontinental-Exchange, Inc	The Northerwestern Mutual Life	Frank Russell Company.	
20071725	ONEOK Partners, L.P	Insurance Company. Knight Holdco LLC	Heartland Pipeline Company.	
20071728	ACON-Bastion Partners II, L.P	Spencer Gifts Holdings, Inc	ONEOK North System, L.L.C. Spencer Gifts Holdings, Inc.	
20071730	Biogen Idec Inc	CardioKine, Inc	CardioKine, Inc.	
20071734	General Electric Company	DTE Energy Company	EIUC Holdings, LLC.	
20071735	Hellman & Friedman Capital Part- ners V, L.P.	Intuit Inc	Intuit Inc.	
20071744	Franklin Holdings (Bermuda), Ltd	James River Group	James River Group.	
20071745	Wellpoint	Nautic Partners V, L.P	Imaging Management Holdings, LLC.	
20071749	Welsh, Carson, Anderson & Stowe X, L.P.	Cornelius Durpe, II	Venture Transport Logistics LLC.	
20071753	Bain Capital Fund IX, L.P	Guitar Center, Inc.	Guitar Center, Inc.	
20071753	Cameron 1 S.a.r.I	Samsonite Corporation	Samsonite Corporation.	
20071768	Elevation Partners, L.P	Warburg Pincus Private Equity VIII, L.P.	SDI Media Holding, Inc.	

FOR FURTHER INFORMATION CONTACT:

Sandra M. Peay, Contact Representative or Renee Hallman, Contact Representative. Gederal Trade Commission, Premerger Notification Office, Bureau of Competition, Room H– 303, Washington, DC 20580, (202) 326– 3100.

By Direction of the Commission.

Donald S. Clark

SEcretary

[FR Doc. 07–3745 Filed 7–31–07; 8:45 am] BILLING CODE 6750–01–M

GENERAL SERVICES ADMINISTRATION

Federal Travel Regulation (FTR); Fly America Act—United States and European Union Open Skies Agreement (US–EU Open Skies Agreement)

AGENCY: Office of Governmentwide Policy (MTT), General Services Administration (GSA).

ACTION: Notice.

SUMMARY: This notice provides preliminary information to Federal agencies on the US–EU Open Skies Agreement. **DATES:** The US–EU Open Skies Agreement dated April 30, 2007 will be effective for the transportation of passengers on March 30, 2008.

FOR FURTHER INFORMATION CONTACT: Ms. Umeki Gray Thorne, phone: (202) 208– 7636; e-mail at *Umeki.thorne@gsa.gov*, or Jim Harte, phone: (202) 501–0483 or e-mail at *Jim.Harte@gsa.gov*, Office of Governmentwide Policy (MTT), General Services Administration, 1800 F Street, NW., Washington, DC 20405.

SUPPLEMENTARY INFORMATION: On April 30, 2007, the United States—European Union Air Transport Agreement was signed, providing community airlines (airlines of the European Community and its Member States) the right to

transport passengers and cargo on U.S. Government procured transportation for both scheduled and charter flights, subject to certain conditions. Specifically, community airlines may transport passengers and cargo on scheduled and charter flights for which a U.S. Government civilian department, agency, or instrumentality:

(1) Obtains the transportation for itself or in carrying out an arrangement under which payment is made by the U.S. Government or payment is made from amounts provided for the use of the U.S. Government, or

(2) Provides the transportation to or for a foreign country or international or other organization without reimbursement, and the transportation is:

(a) between any point in the United States and any point in a Member State, except—with respect to passengers only—between points for which there is a city-pair contract fare in effect, or

(b) between any two points outside the United States.

This provision described above does not apply to transportation funded by the Secretary of Defense or the Secretary of a military department.

The Federal Travel Regulation (FTR), section 301-10.135 (b) (41 CFR 301-10.135(b)) includes an exception to the use of U.S. flag air carrier service when the transportation is provided under a bilateral or multilateral air transportation agreement to which the U.S. Government and the government of a foreign country are parties, and which the Department of Transportation has determined meets the requirements of the Fly America Act. As the U.S.–EU Open Skies agreement is such an air transportation agreement, the General Services Administration (GSA) intends to issue regulations addressing the content of the provision on U.S. Government procured transportation included in the agreement to ensure that all are aware of the change made by the agreement. Regulations addressing air passenger transportation will be included in the FTR.

GSA is in the process of drafting a proposed rule with request for comments on proposed revisions to the FTR that will be published in the **Federal Register**.

Dated: July 17, 2007.

Becky Rhodes,

Deputy Associate Administrator. [FR Doc. E7–14900 Filed 7–31–07; 8:45 am] BILLING CODE 6820–14–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day-07-0026]

Proposed Data Collections Submitted for Public Comment and Recommendations

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 Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call 404-639-5960 and send comments to Maryam I. Daneshvar, CDC Acting Reports Clearance Officer, 1600 Clifton Road, MS-D74, Atlanta, GA 30333 or send an e-mail to omb@cdc.gov.

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. Written comments should be received within 60 days of this notice.

Proposed Project

Report of Verified Case of Tuberculosis (RVCT), (OMB No. 0920– 0026)—Revision—National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (NCHHSTP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

In the United States, an estimated 10 to 15 million people are infected with *Mycobacterium tuberculosis* and about 10% of these persons will develop tuberculosis (TB) disease at some point in their lives. The purpose of this project is to conduct the first major revision since 1993 of the national tuberculosis surveillance form, the Report of Verified Case of Tuberculosis (RVCT), to capture changes in the diagnosis and treatment of TB, and to better monitor trends in TB epidemiology and outbreaks, in order to develop strategies to meet the national goal of TB elimination.

CDC currently conducts and maintains the national surveillance system pursuant to the provisions of section 301(a) of the Public Service Act [42 U.S.C. 241] and section 306 of the Public Service Act [42 U.S.C. 241(a)]. Data are collected by 60 reporting areas (the 50 states, the District of Columbia, New York City, Puerto Rico, and 7 jurisdictions in the Pacific and Caribbean). In 2001, CDC's Division of **Tuberculosis Elimination (DTBE)** initiated a comprehensive review of the RVCT. A work group with nearly 30 members from 15 TB programs, CDC, and the National TB Controllers Association (NTCA) convened 26 conference calls to consider variable revisions based on surveillance significance, ease of data collection, and ability to yield meaningful and useful data. The proposed revision further benefited from review by TB experts active in research and field services and was pilot-tested in two phases. Revisions resulting from stakeholder input include the capture of data on verified TB cases who do not meet the national surveillance definition since counted by another U.S. area, TB treatment was initiated in another country, or TB recurred less than 12 months after completion of therapy. The year the case was reported and the reporting jurisdiction were incorporated into state case identification number with fields for linking state case numbers to allow better tracking of such cases. New variables reflecting diagnostic updates since 1993 include nucleic acid amplification, interferon gamma release assay, computerized tomography, and genotyping. The dates of tuberculin skin test and of specimen collection for other diagnostic tests, along with result dates by laboratory type, were added. The primary reason the patient was evaluated for TB disease, and reasons for extending TB therapy beyond one year were added. Risk characteristics such as diabetes, end-stage renal disease, post-organ transplantation, other immunosuppression, anti-tumor necrosis factor-alpha therapy, contact with a drug-resistant case, contact with an infectious case, missed contacts, incomplete treatment for latent TB infection, immigration status for TB screening, and parental origin and international background for pediatric cases will also be collected. A variable was added to capture whether the TB patient moved during treatment and if so, where, with a check box to indicate