shares of Community Shores Bank, Muskegon, Michigan; 15 percent of the voting shares of Allegiance Bank of North America, Bala Cynwyd, Pennsylvania; 15 percent of the voting shares of Bay Commercial Bank, Walnut Creek, California; 9.90 percent of the voting shares of Cornerstone Bank, Moorestown, New Jersey.

Applicants also have applied to acquire 6 percent of the voting shares of SFB Bancorp, Inc., Elizabethon, Tennessee, and indirectly acquire Security Federal Bank, Elizabethon, Tennessee, and thereby engage in operating a savings association, pursuant to section 225.28(b)(4)(ii), and 9.9 percent of the voting shares of Quaint Oak Bancorp, Southampton, Pennsylvania, and indirectly acquire Quaint Oak Bank, Southampton, Pennsylvania, and thereby engage in operating a savings association, pursuant to section 225.28(b)(4)(ii) of Regulation Y.

- 3. Spence Limited, L.P., Nashville, Tennessee, and Financial Junk, L.L.C., Nashville, Tennesse, to become bank holding companies by acquiring 48 percent of the voting shares of Michigan Community Bancorp, Ltd., and thereby indirectly acquire Lakeside Community Bank, both of Sterling Heights, Michigan.
- B. Federal Reserve Bank of Kansas City (Todd Offenbacker, Assistant Vice President) 1 Memorial Drive, Kansas City, Missouri 64198–0001:
- 1. First Financial Bancshares, Inc., Lawrence, Kansas; to acquire 100 percent of the voting shares of Great American Bank, De Soto, Kansas.

Board of Governors of the Federal Reserve System, April 11, 2008.

Robert deV. Frierson,

Deputy Secretary of the Board. [FR Doc. E8–8112 Filed 4–15–08; 8:45 am] BILLING CODE 6210–01–8

FEDERAL RESERVE SYSTEM

Formations of, Acquisitions by, and Mergers of Bank Holding Companies; Correction

This notice corrects a notice (FR Doc. E8–7645) published on pages 19851–19852 of the issue for Friday, April 11, 2008.

Under the Federal Reserve Bank of St. Louis heading, the entry for Reliable Community Bancshares, Inc., Perryville, Missouri, is revised to read as follows:

A. Federal Reserve Bank of St. Louis (Glenda Wilson, Community Affairs Officer) 411 Locust Street, St. Louis, Missouri 63166–2034: 1. Reliable Community Bancshares, Inc., Perryville, Missouri; to acquire 100 percent of the voting shares of Countryside Bancshares, Inc., and thereby indirectly acquire Countryside Bank, both of Republic, Missouri.

In connection with this application, Countryside Acquisition Corporation, also has applied to become a bank holding company by acquiring 100 percent of the voting shares of Countryside Bancshares, Inc., and thereby indirectly acquire Countryside Bank, all of Republic, Missouri.

Comments on this application must be received by May 5, 2008.

Board of Governors of the Federal Reserve System, April 11, 2008.

Robert deV. Frierson,

Deputy Secretary of the Board. [FR Doc. E8–8113 Filed 4–15–08 8:45 am] BILLING CODE 6210–01–8

GENERAL SERVICES ADMINISTRATION

Multiple Award Schedule Advisory Panel; Notification of Public Advisory Panel Meetings

AGENCY: U.S. General Services Administration (GSA).

ACTION: Notice.

SUMMARY: The U.S. General Services Administration (GSA) Multiple Award Schedule Advisory Panel (MAS Panel), a Federal Advisory Committee, will hold public meetings on the dates and times given below to discuss the multiple award schedules (MAS) program. GSA utilizes the Schedules program to establish long-term Governmentwide contracts with responsible firms to provide Federal, State, and local government customers with access to a wide variety of supplies (products) and services.

The MAS Panel will develop advice and recommendations on MAS program pricing policies, provisions, and procedures in the context of current commercial pricing practices. Specifically, the MAS Panel will review the MAS policy statements, implementing regulations, solicitation provisions and other related documents regarding the structure, use, and pricing for the MAS contract awards.

DATES: *Initial meeting:* The initial meeting of the MAS Panel will take place on Monday, May 5, 2008, beginning at 10 a.m. and adjourning no later than 5 p.m.

Second Meeting: The second meeting for the Panel is scheduled for Thursday, May 22, 2008, 9 a.m. to 5 p.m.

ADDRESSES: Initial meeting: The initial meeting location is AIA Building, 2nd Floor, 1725 New York Avenue, NW., Washington, DC. The building is at the corner of 18th Street and New York Avenue. Entrance to the building is on either 18th Street or New York Avenue.

Second Meeting: The second meeting will be held at the General Services Administration, 1800 F Street, NW., 1st Floor Auditorium, Washington, DC 20405. Please enter the GSA building on F Street at the center of the block. The Auditorium is on the street level to the left inside the entrance. GSA is a secure facility and proper Government issued identification is required for entry. Please allow sufficient time for building entry procedures.

Subsequent meeting dates, locations, and times will be published at least 15 days prior to the meeting date.

FOR FURTHER INFORMATION CONTACT:

Information on the Panel meetings, agendas, and other information can be obtained at http://www.gsa.gov/masadvisorypanel or you may contact Ms. Pat Brooks, Designated Federal Officer, Multiple Award Schedule Advisory Panel, U.S. General Services Administration, 2011 Crystal Drive, Suite 911, Arlington, VA 22205; telephone 703–604–3406, fax 703–605–3454; or via e-mail at mas.advisorypanel@gsa.gov.

SUPPLEMENTARY INFORMATION: Oral comments: Requests to present oral comments must be in writing (e-mail or fax) and received by Ms. Brooks at the above address seven (7) business days prior to the meeting date. Each individual or group requesting an oral presentation will be limited to a total time of five minutes. Speakers should bring at least 50 copies of their comments for distribution to the reviewers and public at the meeting.

Written Comments: Written comments must be also received seven (7) business days prior to the meeting date so that the comments may be provided to the Panel for their consideration prior to the meeting. Comments should be supplied to Ms. Brooks at the address/contact information noted above in the following format: One hard copy with original signature and one electronic copy via e-mail in Microsoft Word.

Availability of Materials: All meeting materials, including meeting agendas, handouts, public comments, and meeting minutes will be posted on the MAS Panel Web site at http://www.gsa.gov/masadvisorypanel or http://www.gsa.gov/masap.

Meeting Access: Individuals requiring special accommodations at these meetings should contact Ms. Brooks at

least ten (10) business days prior to the meeting so that appropriate arrangements can be made.

Dated: April 11, 2008.

David A. Drabkin,

Acting Chief Acquisition Officer.
[FR Doc. E8–8252 Filed 4–15–08; 8:45 am]
BILLING CODE 6820–EP–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Healthcare Research and Quality

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Agency for Healthcare Research and Quality, HHS.

ACTION: Notice.

SUMMARY: This notice announces the intention of the Agency for Healthcare Research and Quality (AHRQ) to request that the Office of Management and Budget (OMB) approve the proposed information collection project: "Assessing the Impact of the Patient Safety Improvement Corps (PSIC) Training Program." In accordance with the Paperwork Reduction Act of 1995, 44 U.S.C. 3506(c)(2)(A), AHRQ invites the public to comment on this proposed information collection.

DATES: Comments on this notice must be received by June 16, 2008.

ADDRESSES: Written comments should be submitted to: Doris Lefkowitz, Reports Clearance Officer, AHRQ, by e-mail at doris.lefkowitz@ahrq.hhs.gov.

Copies of the proposed collection plans, data collection instruments, and specific details on the estimated burden can be obtained from the AHRQ Reports Clearance Officer.

FOR FURTHER INFORMATION CONTACT:

Doris Lefkowitz, AHRQ Reports

Clearance Officer, (301) 427–1477, or by e-mail at *doris.lefkowitz@ahrq.hhs.gov*.

SUPPLEMENTARY INFORMATION:

Proposed Project

Assessing the Impact of the Patient Safety Improvement Corps (PSIC) Training Program

AHRQ proposes to assess the impact of the PSIC training program. This threeweek program was designed and implemented by AHRQ and the Veterans' Administration's (VA) National Center for Patient Safety (NCPS) to improve patient safety by training participants in various patient safety concepts, tools, information, and techniques. The PSIC program represents a new approach to training for AHRQ by focusing on disseminating patient safety information and building skill sets to ultimately foster a national network of individuals who support, promote, and speak a common language of patient safety. Participants have included representatives from State health departments, hospitals and health systems, Quality Improvement Organizations, and a very small number of other types of organizations. AHRQ will use an independent contractor to conduct the assessment of the PSIC training program. The goal of the assessment is to determine the extent to which the PSIC concepts, tools, information, and techniques have been used on the job by training participants and successfully disseminated within and beyond the participating organizations, local areas, regions, and States. AHRQ is assessing the PSIC program pursuant to its authority under 42 Ŭ.S.C. 299(b) and 42 U.S.C. 299a(a) to evaluate its strategies for improving health care quality.

The assessment involves two Webbased questionnaires to examine posttraining activities and patient safety outcomes of the training from multiple perspectives. One questionnaire is directed to training participants while the other is directed to leaders of the organizations from which the training participants were selected. Questionnaires will focus on the following topics: (1) Post-PSIC activities (including how PSIC material has been utilized in their home organizations, types of patient safety activities conducted post-PSIC, and number of people trained in some or all aspects of PSIC since their attendance); (2) barriers to and facilitators of the use of PSIC in the workplace; and (3) perceived outcomes of PSIC participation (e.g., improved patient safety; improved patient safety processes, standards, or policies; improved investigative and analytical processes and selection and implementation of patient safety interventions; improved patient safety culture; improved communications).

Method of Collection

All training participants and organizational leaders from participating organizations will be invited to respond to their corresponding Web-based questionnaire. Invitations will be sent via e-mail, using contact information previously collected by AHRQ and NCPS. Standard non-response follow-up techniques, such as two reminder e-mails that include the link to the questionnaire, will be used. Individuals and organizations will be assured of the privacy of their responses.

Estimated Annual Respondent Burden

Exhibit 1 shows the estimated annualized burden hours for the respondents' time to participate in the study. Each questionnaire is expected to require about 30 minutes to complete, resulting in a total burden of 188 hours.

Exhibit 2 shows the estimated annualized cost burden based on the respondents' time to participate in the study. The total cost burden is estimated to be \$6,278.60.

EXHIBIT 1.—ESTIMATED ANNUALIZED BURDEN HOURS

Form name	Number of respondents	Number of responses per respondent	Hours per response	Total burden hours
Training participant questionnaire	300 75	1 1	30/60 30/60	150 38
Total	375	NA	NA	188

EXHIBIT 2.—ESTIMATED ANNUALIZED COST BURDEN

Form name	Number of respondents	Total burden hours	Average hour- ly wage rate*	Total cost burden
Training participant questionnaire	300	150	\$32.18	\$4,827.00