In addition, the respondent questioned the estimate of 16 hours of burden associated with each response, and again, without providing substantive supporting data, suggested that "a more reasonable estimate would be in the range of 80 to 160 hours per response." The respondent is reminded that estimated burden hours should only include projected hours for those actions which a company would not undertake in the normal course of business. We believe that the estimated 16 hours of burden reasonably reflect the time necessary for a contractor to perform the actions associated with its role in extraordinary contractual actions that go beyond the normal course of business, e.g., issue a request and certification, provide supporting information, as appropriate. Therefore, in the absence of substantive data to support doing otherwise, no adjustments are deemed necessary for the estimated number of respondents or estimated burden hours per respondent.

### C. Annual Reporting Burden

The annual reporting burden is not changed from what was published in the **Federal Register** on September 24, 2009 (74 FR 48744). Based on coordination with subject matter experts and consideration of the requirements for estimating the burden within the Paperwork Burden Act, the determination was made to not revise the annual reporting burden. However, at any point, members of the public may submit comments for further consideration, and are encouraged to provide data to support their request for an adjustment.

The annual reporting burden is estimated as follows:
Respondents: 100.
Responses per Respondent: 1.
Total Responses: 100.
Hours per Response: 16.
Total Burden Hours: 1,600.
Obtaining Copies of Proposals:
Requester may obtain a copy of the information collection documents from

the General Services Administration, Regulatory Secretariat (MVCB), 1275 First Street NE., Washington, DC 20417, telephone (202) 501–4755. Please cite OMB Control No. 9000–0029, Extraordinary Contractual Action Requests, in all correspondence.

Dated: March 15, 2013.

#### William Clark,

Acting Director, Federal Acquisition Policy Division, Office of Governmentwide Acquisition Policy, Office of Acquisition Policy, Office of Governmentwide Policy. [FR Doc. 2013–06516 Filed 3–20–13; 8:45 am]

BILLING CODE 6820-EP-P

### DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Centers for Disease Control and Prevention

[30 Day-13-0217]

# 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 (404) 639–7570 or send an email 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**

Vital Statistics Training Application, OMB No. 0920–0217 (expires May 31, 2013)—Revision—National Center for Health Statistics (NCHS), Centers for Disease Control and Prevention (CDC).

### **Background and Brief Description**

In the United States, legal authority for the registration of vital events, i.e.,

births, deaths, marriages, divorces, fetal deaths, and induced terminations of pregnancy, resides individually with the States (as well as cities in the case of New York City and Washington, DC) and Puerto Rico, the Virgin Islands, Guam, American Samoa, and the Commonwealth of the Northern Mariana Islands. These governmental entities are the full legal proprietors of vital records and the information contained therein. As a result of this State authority, the collection of registration-based vital statistics at the national level, referred to as the U.S. National Vital Statistics System (NVSS), depends on a cooperative relationship between the States and the Federal government. This data collection, authorized by 42 U.S.C. 242k, has been carried out by NCHS since it was created in 1960.

NCHS assists in achieving the comparability needed for combining data from all States into national statistics, by conducting a training program for State and local vital statistics staff to assist in developing expertise in all aspects of vital registration and vital statistics. The training offered under this program includes courses for registration staff, statisticians, and coding specialists, all designed to bring about a high degree of uniformity and quality in the data provided by the States. This training program is authorized by 42 U.S.C. 242b, section 304(a). NCHS notifies State and local vital registration officials, as well as Canadian counterparts, about upcoming training. Individual candidates for training then submit an application form including name, address, occupation, and other relevant information. NCHS is requesting 3 years of OMB clearance for these training application forms. There is no cost to respondents other than their time. The total burden for this project is 30 hours.

#### **AVERAGE ANNUAL BURDEN**

Type of respondent	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
State, Local health department and Canadian vital health employees.	Application for Mortality coding Training	60	1	15/60
State, Local health department and Canadian vital health employees.	Application for Vital Statistics Training	60	1	15/60

Dated: March 15, 2013.

#### Ron A. Otten,

Director, Office of Scientific Integrity (OSI), Office of the Associate Director for Science (OADS), Office of the Director.

[FR Doc. 2013–06495 Filed 3–20–13; 8:45 am]

BILLING CODE 4163-18-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

## Centers for Disease Control and Prevention

[30 Day-13-12QP]

# 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) 639–7570 or send an email 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**

Development of an Evaluation Plan to Evaluate Grantee Attainment of Selected Activities of Comprehensive Cancer Control Priorities—New—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The National Comprehensive Cancer Control Program (NCCCP) is administered by the Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Division of Cancer Prevention and Control (DCPC). Through NCCCP, CDC supports comprehensive cancer control (CCC) programs in 50 states, the District of Columbia, seven tribes and tribal organizations, and seven U.S. Associated Pacific Islands/territories. CDC works with NCCCP awardees to establish coalitions, assess the burden of cancer, determine intervention priorities, and develop and implement CCC plans.

CDC has developed six priorities to guide the work of NCCCP grantees: (1) Emphasize primary prevention of cancer; (2) support early detection and treatment activities; (3) address public health needs of cancer survivors; (4) implement policies, systems, and environmental changes to guide sustainable cancer control; (5) promote health equity as it relates to cancer control; and (6) demonstrate outcomes through evaluation. These six priorities were shared with the CCC program directors, and they were asked to integrate and emphasize the priorities in their updated cancer plans. The six priorities were also incorporated in the new five-year coordinated cooperative agreement, Cancer Prevention and Control Programs for State, Territorial and Tribal Organizations.

CDC is requesting information needed to (1) assess the extent to which CCC programs are implementing the six NCCCP priorities, and (2) assess existing evaluation capacity building tools and revise tools as needed to support the implementation of NCCCP priorities. The information collection will consist of a web-based survey and focus groups that may be conducted in-person or by telephone.

Respondents for the National Comprehensive Cancer Control Program Survey will include 65 program directors representing 50 states, the District of Columbia, seven tribes and tribal organizations, and seven U.S.affiliated territories. In addition, respondents will include four program directors representing the four component states of The Pacific Island Jurisdiction of the Federated States of Micronesia (FSM). Due to the diversity of the FSM, a survey will be distributed to each state-level FSM program director as well as the FSM national program director. The total number of respondents for the survey is 69 and the estimated burden per response is 30 minutes. The survey will be administered twice over a two-year period.

Information will also be collected through focus groups involving approximately 40 program directors and evaluators. Up to four focus groups will be conducted with a maximum of ten respondents per group. The estimated burden per response is 1.5 hours. Focus groups will be conducted once over a two-year period.

OMB approval is requested for two years. Participation is voluntary and there are no costs to the respondents other than their time. The total estimated burden hours per year are 65.

### ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondent	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hr)	
NCCCP State Grantee Program Director	National Comprehensive Car Program Survey.	ncer Control	69	1	0.5
NCCCP State Grantee Program Project Director or Designated CCC Staff Member.	National Comprehensive Car Program Focus Group.	ncer Control	20	1	1.5