

should be submitted to: Edward Springer, GSA Desk Officer, OMB, Room 10236, NEOB, Washington, DC 20503, and a copy to Stephanie Morris, General Services Administration (MVP), 1800 F Street, NW., Room 4035, Washington, DC 20405.

FOR FURTHER INFORMATION CONTACT:

Linda Klein, Acquisition Policy Division, GSA (202) 501-3775.

SUPPLEMENTARY INFORMATION:

A. Purpose

The General Services Administration is requesting the Office of Management and Budget (OMB) to review and approve information collection, 3090-0027, concerning GSAR, Part 542, Contract Administration, and Part 546, Quality Assurance. Under certain contracts, because of reliance on contractor inspection in lieu of Government inspection, GSA's Federal Supply Service (FSS) requires documentation from its contractors to effectively monitor contractor performance and ensure that it will be able to take timely action should that performance be deficient.

B. Annual Reporting Burden

Respondents: 4604.

Annual Responses: 116,869.

Burden Hours: 7830.

Obtaining Copies of Proposals:

A copy of this proposal may be obtained from the General Services Administration, Acquisition Policy Division (MVP), 1800 F Street, NW., Room 4035, Washington, DC 20405, or by telephoning (202) 501-4744, or by faxing your request to (202) 501-4067. Please cite OMB Control No. 3090-0027, GSAR, Part 542, Contract Administration, and Part 546, Quality Assurance, in all correspondence.

Dated: October 11, 2001.

Al Matera,

Director, Acquisition Policy Division.

[FR Doc. 01-26294 Filed 10-17-01; 8:45 am]

BILLING CODE 6820-61-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifier: CMS-R-249]

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Centers for Medicare and Medicaid Services.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Centers for Medicare and Medicaid Services (CMS), Department of Health and Human Services, is publishing the following summary of proposed collections for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

Type of Information Collection Request: Extension of a currently approved collection; *Title of Information Collection:* Hospice Cost Report and Supporting Regulations in 42 CFR 413.20, and 413.24; *Form No.:* CMS-R-0249 (OMB# 0938-0758); *Use:* Medicare certified hospice programs must file an annual cost report with CMS. This report contains information on overhead costs, assets, depreciation, and compensation which will be used for hospice rate evaluations.; *Frequency:* Annually; *Affected Public:* Business or other for-profit, Not-for-profit institutions, and State, Local or Tribal Government; *Number of Respondents:* 1,720; *Total Annual Responses:* 1,720; *Total Annual Hours:* 302,720.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access CMS's Web site address at <http://www.hcfa.gov/regs/prdact95.htm>, or e-mail your request, including your address, phone number, OMB number, and CMS document identifier, to Paperwork@hcfa.gov, or call the Reports Clearance Office on (410) 786-1326. Written comments and recommendations for the proposed information collections must be mailed within 60 days of this notice directly to the CMS Paperwork Clearance Officer designated at the following address:

CMS, Office of Information Services, Security and Standards Group, Division of CMS Enterprise Standards Attention: Dawn Willingham, CMS-R-249, Room N2-14-26 7500 Security Boulevard, Baltimore, Maryland 21244-1850.

Dated: October 10, 2001.

John P. Burke III,

CMS Reports Clearance Officer, CMS Office of Information Services, Security and Standards Group, Division of CMS Enterprise Standards.

[FR Doc. 01-26286 Filed 10-17-01; 8:45 am]

BILLING CODE 4120-03-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

Anti-Infective Drugs Advisory Committee; Notice of Meeting

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

This notice announces a forthcoming meeting of a public advisory committee of the Food and Drug Administration (FDA). The meeting will be open to the public.

Name of Committee: Anti-Infective Drugs Advisory Committee.

General Function of the Committee: To provide advice and recommendations to the agency on FDA's regulatory issues.

Date and Time: The meeting will be held on November 7, 2001, from 8 a.m. to 5 p.m.

Location: Holiday Inn, Kennedy Ballroom, 8777 Georgia Ave., Silver Spring, MD.

Contact: Thomas H. Perez, Center for Drug Evaluation and Research (HFD-21), Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857, 301-827-6758, e-mail: PerezT@cder.fda.gov, or FDA Advisory Committee Information Line, 1-800-741-8138 (301-443-0572 in the Washington, DC area), code 12530. Please call the Information Line for up-to-date information on this meeting.

Agenda: The committee will consider the safety and efficacy of a new drug application (NDA) 50-710, Pfizer, Inc., for 1-day and 3-day dosing regimens of azithromycin suspension for the treatment of otitis media.

Procedure: Interested persons may present data, information, or views, orally or in writing, on issues pending before the committee. Written submissions may be made to the contact person by October 30, 2001. Oral presentations from the public will be scheduled between approximately 1 p.m. and 2 p.m. Time allotted for each presentation may be limited. Those desiring to make formal oral presentations should notify the contact person before October 30, 2001, and submit a brief statement of the general

nature of the evidence or arguments they wish to present, the names and addresses of proposed participants, and an indication of the approximate time requested to make their presentation.

Notice of this meeting is given under the Federal Advisory Committee Act (5 U.S.C. app. 2).

Dated: October 11, 2001.

Linda A. Suydam,

Senior Associate Commissioner.

[FR Doc. 01-26276 Filed 10-17-01; 8:45 am]

BILLING CODE 4160-01-S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Proposed Collection; Comment Request; The National Cancer Institute Information Service Comprehensive Evaluation

SUMMARY: 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

National Cancer Institute (NCI), the National Institutes of Health (NIH) will publish periodic summaries of proposed projects to be submitted to the Office of Management and Budget (OMB) for review and approval.

Proposed Collection

Title: The National Cancer Institute Cancer Information Service Comprehensive Evaluation. **Type of Information Collection Request:** New. **Need and Use of Information Collection:** The NCI Office of Communications has dedicated resources to the Cancer Information Service Branch to conduct an independent, scientifically designed and implemented evaluation of the Cancer Information Service (CIS), an NCI program that serves as a national resource for information and education about cancer. The study will assess the extend to which the program has been implemented and the impact and outcomes of the program in affecting the public and CIS partners. Partners are national, state, and regional organizations that collaborate with CIS.

For this study, four separate data collection efforts will be conducted: (1)

The National User Survey, a survey of a sample of CIS Information Service users; (2) The National Partner Survey, a survey of a sample of CIS networking, education program, and program development partners; (3) The Case Study Partner Survey in-depth interviews with selected partners; and (4) The Case Study Audience Survey, a survey of audiences served by selected partners. The National User Survey, The National Partner Survey, and The Case Study Partner Survey will be collected using telephone interviews. The Case Study Audience Survey will be collected using self-administered paper and pencil surveys of target audiences. The findings will form the basis of annual reports on evaluation findings. These reports will provide assistance in improving the programs, products, and services of CIS. **Frequency of Response:** One time only with the exception of the Case Study Incidence Survey which includes a pre and post survey. **Affected Public:** Organizations, individuals and households. **Type of Respondents:** Adults using CIS services and CIS partners. The annual reporting burden is as follows:

TABLE 1.—RESPONDENT AND BURDEN ESTIMATE

Type of respondents	Estimated number of respondents	Estimated number of responses of per respondent	Average burden hours per response	Estimated total burden hours requested	Estimated annualized burden (over 3 years)
The National User Survey					
Screener respondent	625	1	0.08	50	17
CIS users	1875	1	0.42	788	263
The National Partner Survey					
CIS partners	1000	1	0.75	750	250
The Case Study Partner Survey					
CIS partners	24	1	0.75	18	6
The Case Study Audience Survey					
Event audience	1200	2	0.25	600	200
Total	4724	0.45	2206	736

The annualized cost to respondents is estimated at: \$7,592. There are no Capital Cost to report. There are no Operating or Maintenance Costs to report.

Request for Comments

Written comments and/or suggestions from the public and affected agencies are invited on one or more of the following points: (1) Whether the

proposed collection of information is necessary for the proper performance of the function of the agency, including whether the information will have practical utility; (2) The accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (3) Ways to minimize the burden of the collection of information on those who

are to respond, including the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

FOR FURTHER INFORMATION CONTACT: To request more information on the proposed project or to obtain a copy of the data collection plans, contact Madeline La Porta, Project Officer for Evaluation, Cancer Information Service