

Board of Governors of the Federal Reserve System, November 29, 2006.

Robert deV. Frierson,

Deputy Secretary of the Board.

[FR Doc.E6-20441 Filed 12-1-06; 8:45 am]

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GENERAL SERVICES ADMINISTRATION

Federal Travel Regulation (FTR) Maximum Per Diem Rates for Florida and Virginia

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

ACTION: Notice of Per Diem Bulletin 07-02, revised continental United States (CONUS) per diem rates.

SUMMARY: The General Services Administration (GSA) has reviewed the lodging rate of a certain location in the State of Florida. Also, GSA is adding Greene County, Virginia to the County column for Charlottesville, Virginia, and will begin to receive Charlottesville's maximum per diem rate. The per diems prescribed in Bulletin 07-02 may be found at www.gsa.gov/perdiem.

DATES: This notice is effective December 4, 2006, and applies to travel performed on or after December 14, 2006.

FOR FURTHER INFORMATION CONTACT: For clarification of content, contact Mr. Cy Greenidge, Office of Governmentwide Policy, Travel Management Policy, at (202) 219-2349. Please cite FTR Per Diem Bulletin 07-02.

SUPPLEMENTARY INFORMATION:

A. Background

After an analysis of the per diem rates established for FY 2007 (see the **Federal Register** notice at 71 FR 43772, August 2, 2006), the per diem rate is being changed in the following locations:

- State of Florida*
- Brevard County
- State of Virginia*
- Greene County

Per diem rates are published on the Internet at www.gsa.gov/perdiem as an FTR Per Diem Bulletin and published in the **Federal Register** on a periodic basis.

This process ensures timely increases or decreases in per diem rates established by GSA for Federal employees on official travel within CONUS. Notices published periodically in the **Federal Register**, such as this one, now constitute the only notification of revisions in CONUS per diem rates to agencies.

Dated: November 22, 2006.

Russ H. Pentz,

*Assistant Deputy Associate Administrator,
Office of Transportation and Personal
Property.*

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day-07-06AU]

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) 639-5960 or send an e-mail to omb@cdc.gov. Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395-6974. Written comments should be received within 30 days of this notice.

Proposed Project

Formative Research on Issues Related to the Use of Mass Media in African-American Women: Phase II—New—National Center for Chronic Disease Prevention and Control (NCCDPHP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Women's health programs, including the National Breast and Cervical Cancer

Early Detection Program (NBCCEDP), offer low-cost or free breast cancer screening to uninsured, low-income women. In 1991, CDC established the NBCCEDP to increase breast and cervical cancer screening among uninsured, underserved, low-income women. To date, over 1.5 million women have received services from NBCCEDP-sponsored programs, yet NBCCEDP-sponsored programs are estimated to reach only 18% of women 50 years old and older who are eligible for screening services. Why women do not participate in this screening is not well understood. A research priority for the NBCCEDP is to identify effective strategies to increase enrollment among eligible women who have never received breast or cervical cancer screening.

CDC conducted a phase I study (OMB number 0920-0652) to investigate, through a series of eight focus groups in Macon and Savannah, Georgia, the reasons why women who were eligible for NBCCEDP services did or did not participate in the program. Respondents were low-income, African American women aged 40 to 64 years. The study also investigated viable sources, messages, and channels through which to reach this population with promotional messages about breast cancer screening.

The proposed phase II data collection will build on phase I activities. Eight additional focus groups will be conducted in Macon and Savannah, Georgia, to (1) test consumer response to concepts that arose in the Phase I formative research related to breast cancer screening, and (2) test a series of radio and print health messages aimed at increasing mammography screening among low-income African American women for cultural appropriateness. Respondents will be NBCCEDP-eligible African-American women aged 40-64 years. There are no costs to the respondents other than their time. The total estimated annualized burden hours are 175.

ESTIMATED ANNUALIZED BURDEN TABLE

Type of respondent	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
African American women, aged 40-64 years, GA residents.	Recruitment Screener (initial)	150	1	5/60
	Recruitment Screener (spot-check)	24	1	5/60
	Pre-discussion Information Sheet	80	1	30/60

ESTIMATED ANNUALIZED BURDEN TABLE—Continued

Type of respondent	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)
	Informed Consent and Focus Group Discussion.	80	1	90/60

Dated: November 27, 2006.

Deborah Holtzman,

Reports Clearance Officer, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day-07-0582]

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 Seleda Perryman, CDC Assistant 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

Youth Media Campaign Awareness and Reaction Tracking Study—Extension (0920-0582)—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

In FY 2001, Congress established the Youth Media Campaign at the Centers for Disease Control and Prevention (CDC). Specifically, the House Appropriations Language said: *The Committee believes that, if we are to have a positive impact on the future health of the American population, we must change the behaviors of our children and young adults by reaching them with important health messages.* CDC coordinated the planning, implementation, and evaluation of a campaign, VERB. It's what you do., designed to encourage tweens (children aged 9 to 13 years old) to be physically active everyday. The campaign was

based on principles that have been shown to enhance success, including: Designing messages based on research; testing messages with the intended audiences; involving young people in all aspects of campaign planning and implementation; enlisting the involvement and support of parents and other influencers; tracking the campaign's effectiveness; and revising Campaign messages and strategies as needed. The campaign was implemented June 2002 through September 30, 2006.

As part of the monitoring of the VERB brand awareness and understanding of its messages, the CDC conducted a tracking study (YMC Tracking Survey). In accordance with the original OMB approval (OMB NO. 0920-0582; Exp. May 2007), the data collection was done by telephone survey on a monthly, then quarterly, basis through out the campaign, surveying 300 tweens at each data collection. The survey measured VERB awareness and understanding, various attributes of the brand (coolness, likeability) and appeal of the advertising.

All VERB advertising ended September 30, 2006. The purpose of this collection is to examine the tween audience's retention of the brand and its meaning 1-year post campaign. Results will inform future planners of health marketing and communication campaigns on how a campaign's awareness and understanding diminish over time. There is no cost to the respondents other than their time.

ESTIMATE OF ANNUALIZED BURDEN HOURS

Type of respondent	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden hours
Parent	YMC Tracking Survey Screening	600	1	2/60	20
Tween	YMC Tracking Survey	600	1	15/60	150
Total	170