9000–0034, in all correspondence related to this collection. All comments received will be posted without change to http://www.regulations.gov, including any personal and/or business confidential information provided.

FOR FURTHER INFORMATION CONTACT: Mr. Michael O. Jackson, Procurement Analyst, Contract Policy Branch, GSA, 202–208–4949 or email michaelo.jackson@gsa.gov.

SUPPLEMENTARY INFORMATION:

A. Purpose

The objective of this information collection, for the examination of records by Comptroller General and contract audit, is to require contractors to maintain certain records and to ensure the Comptroller General and/or agency have access to, and the right to, examine and audit records, which includes: books, documents, accounting procedures and practices, and other data, regardless of type and regardless of whether such items are in written form, in the form of computer data, or in any other form, for a period of three years after final payment. This information is necessary for examination and audit of contract surveillance, verification of contract pricing, and to provide reimbursement of contractor costs, where applicable. The records retention period is required by the statutory authorities at 10 U.S.C. 2313, 41 U.S.C. 254, and 10 U.S.C. 2306, and are implemented through the following clauses: Audit and Records-Negotiation clause, 52.215-2; Contract Terms and Conditions Required to Implement Statutes or Executive Orders—Commercial Items clause, 52.212-5; and Audit and Records-Sealed Bidding clause, 52.214–26. This information collection does not require contractor's to create or maintain any records that the contractor does not normally maintain in its usual course of business.

Public Comments

Public comments are particularly invited on: Whether this collection of information is necessary for the proper performance of functions of the Federal Acquisition Regulation (FAR), and whether it will have practical utility; whether our estimate of the public burden of this collection of information is accurate, and based on valid assumptions and methodology and ways to enhance the quality, utility, and clarity of the information to be collected.

B. Annual Reporting Burden

For this information collection requirement data from Fiscal Year (FY) 2012 was retrieved from the Federal Procurement Data System—Next Generation (FPDS–NG).

The parameters for this information collection were based on the prescription from each of the applicable clauses. Resulting from a thorough review of each clause prescription, it was determined that the type of contracts associated with this information collection are: Negotiated awards over the simplified acquisition threshold (SAT) using commercial procedures; Negotiated awards over the SAT using other than commercial procedures; and, Sealed bid awards over \$700,000. For negotiated awards over the SAT using commercial procedures, FPDS-NG shows 18,709 contracts (7,797 of those were awarded to unique vendors). For negotiated awards over the SAT using other than commercial procedures, FPDS-NG shows 14,085 contracts (6,731 of those were awarded to unique vendors). For sealed bid awards over \$700,000, FPDS-NG shows 1,602 contracts (809 of those were awarded to unique vendors). This equates to a total of 34,396 total actions and a total of 15,337 unique vendors after you drill down the 34,396 actions looking only for the unique Data Universal Numbering System (DUNS) number. The 15,337 actions will be used as the number of estimated respondents per vear.

It is estimated that number of responses per respondent is ten. This is derived by dividing the number of contract actions by the number of unique vendors (2.2 contracts), plus an average of three subcontracts per contract (considering the applicable clauses flows down to subcontractors). It is further estimated that the time required to read and prepare a response is 60 minutes.

Respondents: 15,337. Responses per Respondent: 10. Total number of responses: 153,370. Hours per Response: 1.0. Total Burden Hours: 153,370.

The 153,370 burden hours represent a significant increase over the 63,934 hours that was published in the information collection notice in the **Federal Register** at 75 FR 10268 on March 5, 2010, due to the increase in the estimated hours per response, by fifty minutes, from ten minutes to 1 hour.

Obtaining Copies of Proposals: Requesters may obtain a copy of the information collection documents from the General Services Administration, Regulatory Secretariat (MVCB), 1800 F Street NW., Washington, DC 20405, telephone 202–501–4755. Please cite OMB Control Number 9000–0034, Examination of Records by Comptroller General and Contract Audit, in all correspondence.

Dated: July 9, 2013.

Karlos Morgan,

Acting Director, Federal Acquisition Policy, Office of Governmentwide Acquisition Policy, Office of Acquisition Policy, Office of Governmentwide Policy.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day-13-13YQ]

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 404–639–7570 or send comments to LeRoy Richardson, 1600 Clifton Road, MS–D74, Atlanta, GA 30333 or send an email 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

Institutional Awareness and Commitment to Ensuring Safe, Stable, and Nurturing Relationships and Environments for Children and Prevention Child Maltreatment—NewNational Center for Injury Prevention and Control (NCIPC)—Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Safe, stable, nurturing relationships and environments set children on a positive trajectory for optimal child development and health, provide a buffer against the effects of adverse child experiences, are fundamental to healthy brain development and have a positive impact on a broad range of health problems across the life course. Promoting safe, stable, nurturing relationships and environments may also reduce child maltreatment which is a significant public health problem affecting physical and emotional health throughout the lifespan.

NCIPC is funding five state health departments in Fiscal Year 2012 to coordinate and manage existing and new partnerships with other sectors to promote safe, stable, nurturing relationships and environments for children; and work with partners to identify strategies across sectors that promote safe, stable, nurturing relationships and environments. CDC

requests OMB approval for two years to collect information that will establish the baseline level of state health departments' and partners' awareness and commitment to ensuring safe, stable, and nurturing relationships and environments for children and preventing child maltreatment.

This information will be collected from staff at health departments soon after receiving their award and from their partners at the start of each new partnership. Respondents will be 3 staff members from 5 health departments receiving funding and 3 staff members at approximately 11 organizations or agencies the health departments choose to partner with. Information will be collected once using SurveyMonkey®, an electronic web-based interface which is a secure Web site that meets the Safe Harbor and European Union data protection requirements. This ICR will only collect data pertaining to organizations. No individual identifiable information will be requested.

Each grantee will receive a personalized advance notification letter, followed by an email with a link to the SurveyMonkey® site. In turn, the grantee will send a personalized advance notification letter, followed by an email with a link to the SurveyMonkey® site to each new partner throughout the funding period.

The goal of the data collection is to assess awardee awareness and commitment so that CDC may establish state health departments' and partners' level of commitment at the start of the funding. This information will be compared to post-funding awareness and commitment data which, along with other data sources (i.e., changes in public awareness and commitment, and changes in policies and programs), will allow CDC to establish the success of this funding announcement.

Given five health departments with 10 partner organizations each and 3 staff at each organization responding, the total number of respondents for this project is 165 (83 respondents per year). Total project burden over the two years of data collection is 78 hours (39 hours per year).

There are no costs to respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hrs.)	Total burden (in hrs.)
Grantees and their partners	Institutional awareness and commitment survey.	83	1	28/60	39 39

Leroy A. Richardson,

Chief, Information Collection Review Office, Office of Scientific Integrity, Office of the Associate Director for Science, Office of the Director, Centers for Disease Control and Prevention.

[FR Doc. 2013–16769 Filed 7–12–13; 8:45 am] BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day 13-13ZC]

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 404–639–7570 or send comments to LeRoy Richardson, 1600 Clifton Road, MS D–74, Atlanta, GA 30333 or send an email 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

Case Studies to Explore Interventions to Support, Build, and Provide Legacy Awareness for Young Breast Cancer Survivors—New—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Young breast cancer survivors (YBCS, defined as women diagnosed with breast cancer under 45 years old) may have a more difficult time coping with breast cancer treatment and aftercare when compared to older breast cancer survivors. For example, breast cancer can be more serious, treatment is often multimodal and more toxic, and side effects can be more severe for YBCS than for older women. As part of the Patient Protection and Affordable Care Act (H.R. 3590, 2010), Congress passed the Education and Awareness Requires Learning Young (EARLY) Act, Sec. 10413. The EARLY Act directed CDC to