

That section of the Virginia statute requires that “[a]ll regulations promulgated herewith shall promote the purposes of this section.” Because the purpose of the Funeral Rule is to increase the availability of information to consumers to improve price competition,³⁹ and because this section of the statute expressly incorporates that rule, it appears unlikely that the General Assembly intended to authorize a regulation inhibiting price competition as a foreseeable result of the Board’s general authority to regulate the funeral industry.⁴⁰

V. Opportunity for Public Comment

The proposed Order has been placed on the public record for 30 days to receive comments from interested persons. Comments received during this period will become part of the public record. After 30 days, the Commission will again review the Agreement and comments received, and will decide whether it should withdraw from the Agreement or make final the Order contained in the Agreement.

By accepting the proposed Order subject to final approval, the Commission anticipates that the competitive issues described in the proposed Complaint will be resolved. The purpose of this analysis is to invite and facilitate public comment concerning the proposed Order. It is not intended to constitute an official interpretation of the Agreement and proposed Order or to modify their terms in any way.

By direction of the Commission.

Donald S. Clark,

Secretary.

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2806(19) (Michie 2003). Virginia is one of 18 states that has adopted at least part of the requirements of the Funeral Rule. AARP, *The Deathcare Industry* 7 (Public Policy Institute, May, 2000).

³⁹ See e.g., 1990 FTC Staff Report at 12; Comments of AARP on the Commission’s Review of the Funeral Rule, 16 CFR Part 453 (September 14, 1999), available at <http://www.ftc.gov/bcp/rulemaking/funeral/comments/>. Comment A–55–AARP Funeral Rule Comments.htm. (“Certainly, one of the intended effects of implementing the Rule was to spur on competition, by making it easier for consumers to make an educated decision.”).

⁴⁰ *Indiana Movers Analysis* at 5.

HARRY S. TRUMAN SCHOLARSHIP FOUNDATION

Sunshine Act Meeting: Meeting of the Trustees and Officers of the Harry S. Truman Scholarship Foundation, September 24, 2004, 11 a.m.–12:30 p.m., U.S. Capitol, Room HC–6

I. Call to order, Welcome, Approval of the Minutes of the Meeting of May 7, 2004;

II. Consideration of election of a Vice-President of the Truman Scholarship Foundation;

III. Adoption of a policy and implementation language for Truman Scholars Accountability;

IV. Discussion and Board Action on Proposed Three Year Trial of a Truman Fellows Program providing for a one-year professional experience in Washington following receipt of a baccalaureate degree and prior to graduate school;

V. Reauthorization of the Public Service Law Conference;

VI. Adoption of a Budget and approval of the Bulletin of Information for the 2004–2005 Year for the Foundation;

VII. Old Business;

VIII. New Business;

IX. Adjournment.

Dated: August 18, 2004.

Louis H. Blair,

Executive Secretary.

[FR Doc. 04–19554 Filed 8–23–04; 1:57 pm]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Continuation of the Rabia Balkhi Hospital (RBH) Physician Training and Support Program in Afghanistan

AGENCY: Office of the Secretary, HHS.

ACTION: Notice of intent to fund a single eligibility award.

SUMMARY: The Office of Global Health Affairs (OGHA) announces the intent to allocate fiscal year (FY) 2004 funds for a grant program for services provided by the International Medical Corps (IMC) that will allow the continuation of the Rabia Balkhi Hospital (RBH) Physician Training and Support Program in Afghanistan. The goal of the project is to reduce the maternal and infant mortality rates in Afghanistan through the training of obstetrician-gynecologists (OB-GYNS) and other health care workers at RBH. Forty percent of deaths among women of childbearing age in Afghanistan are caused by preventable complications related to childbirth, and

an estimated one in four children dies before reaching their fifth birthday.

A. Purpose

The project’s main objectives include: (1) To improve the capacity of the hospital’s staff to practice medicine, (2) to improve the quality of care for RBH patients. These services are expected to dramatically improve patient care and to make a substantial reduction in maternal and infant illness and deaths at the hospital.

The Catalog of Federal Domestic Assistance number for this program is 93.003.

B. Eligible Applicant

Assistance will be provided only to International Medical Corps (IMC).

The IMC is the only organization in Afghanistan qualified to collaborate with the Office of Global Health Affairs. IMC is a global humanitarian nonprofit organization, exceptionally well-qualified, with a vast network of health facilities staffed by a dedicated cadre of health care professionals. In Afghanistan, IMC has established a strong foundation for training activities, and the ongoing provision of primary health care services to men, women, and children throughout the country. IMC supported clinics have treated more than 500,000 men, women, and children in Afghanistan since 2001. No other institution in the country has the capacity and expertise to accomplish this task.

C. Funding

Approximately \$685,000 is available in FY 2004 to fund this award. It is expected that the award will cover costs for the period February 1, 2004 through September 30, 2004. Funding estimates may change.

D. Where To Obtain Additional Information

For general comments or questions about this announcement, contact: Brian Trent, Management Operations Officer, Office of Global Health Affairs, Department of Health and Human Services, 5600 Fishers Lane, Room 18–101, Rockville, MD 20857, Telephone: 301–443–4560.

For technical questions about this program, contact: Amar Bhat, Office of Global Health Affairs, Department of Health and Human Services, 5600 Fishers Lane, Room 18–101, Rockville, MD 20857, Telephone: 301–443–1410, E-mail: abhat@osops.dhhs.gov.