have been placed in liquidation, please contact the Chief, Receivership

Oversight at *RO@fdic.gov* or at Division of Resolutions and Receiverships, FDIC,

600 North Pearl Street, Suite 700, Dallas, TX 75201.

INSTITUTIONS IN LIQUIDATION [In alphabetical order]

FDIC ref. No.	Bank name	City	State	Date closed
10541	1 - 3	New York	NY	03/20/2023
10542		Santa Clara	CA	03/27/2023

Federal Deposit Insurance Corporation. Dated at Washington, DC, on March 27, 2023.

James P. Sheesley,

Assistant Executive Secretary. [FR Doc. 2023–06660 Filed 3–30–23; 8:45 am]

BILLING CODE 6714-01-P

FEDERAL RESERVE SYSTEM

Change in Bank Control Notices; Acquisitions of Shares of a Bank or Bank Holding Company

The notificants listed below have applied under the Change in Bank Control Act (Act) (12 U.S.C. 1817(j)) and § 225.41 of the Board's Regulation Y (12 CFR 225.41) to acquire shares of a bank or bank holding company. The factors that are considered in acting on the applications are set forth in paragraph 7 of the Act (12 U.S.C. 1817(j)(7)).

The public portions of the applications listed below, as well as other related filings required by the Board, if any, are available for immediate inspection at the Federal Reserve Bank(s) indicated below and at the offices of the Board of Governors. This information may also be obtained on an expedited basis, upon request, by contacting the appropriate Federal Reserve Bank and from the Board's Freedom of Information Office at https://www.federalreserve.gov/foia/ request.htm. Interested persons may express their views in writing on the standards enumerated in paragraph 7 of the Act.

Comments regarding each of these applications must be received at the Reserve Bank indicated or the offices of the Board of Governors, Ann E. Misback, Secretary of the Board, 20th Street and Constitution Avenue NW, Washington, DC 20551–0001, not later than April 17, 2023.

A. Federal Reserve Bank of Chicago (Colette A. Fried, Assistant Vice President) 230 South LaSalle Street, Chicago, IL 60604.

1. The Kehl Family 2009 Trust; the Kehl Grandchildren's Trust dated November 5, 1997; the Kehl Grandchildren's Trust fbo Cody J. Kehl

dated November 5, 1997; the Ruth A. Kehl Grandchildren's Trust fbo Jacob R. Winter dated November 5, 1997; and the Ruth A. Kehl Grandchildren's Trust fbo Tanner C. Kehl dated November 5, 1997. The First National Bank in Sioux Falls, as trustee of the aforementioned trusts, all of Sioux Falls, South Dakota; The Kevin A. Kehl Trust May 15, 2017, Kevin A. Kehl. as trustee. Dubuque. Iowa: and Krystina L. Moore, Tiffin, Iowa; to join the Kehl Family Control Group, a group acting in concert, to acquire voting shares of Savanna-Thomson Investment, Inc., Savanna, Illinois, and thereby indirectly acquire voting shares of Savanna-Thomson State Bank, Thomas,

Additionally, Daniel J. Kehl, Solon, Iowa, to join the Kehl Family Control Group, to retain voting shares of Savanna-Thomson Investment, Inc., and thereby indirectly acquire voting shares of Savanna-Thomson State Bank.

Board of Governors of the Federal Reserve System. $\,$

Margaret McCloskey Shanks,

Deputy Secretary of the Board. [FR Doc. 2023–06752 Filed 3–30–23; 8:45 am] BILLING CODE P

GENERAL SERVICES ADMINISTRATION

[OMB Control No. 3090–XXXX; Docket No. 2022–0001; Sequence No. 16]

GSA Equity Study on Remote Identity Proofing; Correction

Correction

In the FR Doc. 2023–06174, appearing on page 18139, in the issue of Monday, March 27, 2023, make the following correction:

On page 18139, in the second column, in the **SUPPLEMENTARY INFORMATION** section, "FR Doc. 2023–03131" should read "FR Doc. 2023–02918".

Lois Mandell,

Director, Regulatory Secretariat Division. [FR Doc. 2023–06711 Filed 3–30–23; 8:45 am]
BILLING CODE 6820–34–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day-23-1308; Docket No. CDC-2023-0021]

Proposed Data Collection Submitted for Public Comment and Recommendations

AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: Notice with comment period.

SUMMARY: The Centers for Disease Control and Prevention (CDC), as part of its continuing effort to reduce public burden and maximize the utility of government information, invites the general public and other federal agencies the opportunity to comment on a continuing information collection, as required by the Paperwork Reduction Act of 1995. This notice invites comment on a proposed information collection project titled Validated Follow-up Interview of Clinicians on Outpatient Antibiotic Stewardship Interventions. This collection aims to perform an interview of outpatient clinicians regarding the acceptability and perceived clinician-level barriers associated with our year-long implementation of interventions designed around the Core Elements of Outpatient Antibiotic Stewardship. DATES: CDC must receive written

comments on or before May 30, 2023. **ADDRESSES:** You may submit comments, identified by Docket No. CDC-2023-0021 by either of the following methods:

• Federal eRulemaking Portal: www.regulations.gov. Follow the instructions for submitting comments.

• Mail: Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS H21–8, Atlanta, Georgia 30329.

Instructions: All submissions received must include the agency name and Docket Number. CDC will post, without change, all relevant comments to www.regulations.gov.

Please note: Submit all comments through the Federal eRulemaking portal (www.regulations.gov) or by U.S. mail to the address listed above.

FOR FURTHER INFORMATION CONTACT: To request more information on the proposed project or to obtain a copy of the information collection plan and instruments, contact Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS H21–8, Atlanta, Georgia 30329; Telephone: 404–639–7570; Email: omb@cdc.gov.

SUPPLEMENTARY INFORMATION: Under the Paperwork Reduction Act of 1995 (PRA) (44 U.S.C. 3501-3520), federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. In addition, the PRA also requires federal agencies to provide a 60-day notice in the Federal Register concerning each proposed collection of information, including each new proposed collection, each proposed extension of existing collection of information, and each reinstatement of previously approved information collection before submitting the collection to the OMB for approval. To comply with this requirement, we are publishing this notice of a proposed data collection as described below.

The OMB is particularly interested in comments that will help:

- 1. Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;
- 2. Evaluate 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. Enhance the quality, utility, and clarity of the information to be collected:
- 4. Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submissions of responses; and
 - 5. Assess information collection costs.

Proposed Project

Validated Interview and Survey of Outpatient Providers on Antibiotic Stewardship Interventions (OMB Control No. 0920–1308)— Reinstatement—National Center for Emerging Zoonotic and Infectious Disease (NCEZID), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Inappropriate antibiotic prescribing is a major driver of antibiotic resistance

which is an urgent national and global health threat. Additionally, inappropriate antibiotic prescribing contributes to avoidable adverse drug events that cause substantial harms to patients. Most antibiotic prescribing originates in traditional outpatient settings such as physician offices and emergency departments, and at least 30% of these prescriptions are completely unnecessary.

Over the past decade there has been rapid growth in non-traditional outpatient settings including Urgent Care clinics. Recent evidence shows that when compared to traditional office settings, inappropriate antibiotic prescribing is substantially higher in Urgent Care clinics making this an important priority for antibiotic stewardship. The design, development, and evaluation of durable stewardship interventions addressing the unique setting of Urgent Care clinics is an important area of unmet need. This data collection will assess knowledge, attitudes, and practices related to antibiotic prescribing among clinicians after implementation of a year-long Urgent Care stewardship initiative.

CDC requests OMB approval for an estimated 62 annualized burden hours. There is no cost to respondents other than their time to participate.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden (in hours)
Urgent Care Clinician Urgent Care Clinician	Interview Guide	20 125	1 1	1 20/60	20 42
Total					62

Jeffrey M. Zirger,

Lead, Information Collection Review Office, Office of Scientific Integrity, Office of Science, Centers for Disease Control and Prevention. [FR Doc. 2023–06734 Filed 3–30–23; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day-23-1215]

Agency Forms Undergoing Paperwork Reduction Act Review

In accordance with the Paperwork Reduction Act of 1995, the Centers for Disease Control and Prevention (CDC) has submitted the information collection request titled "Awardee Lead Profile Assessment (ALPA)" to the Office of Management and Budget (OMB) for review and approval. CDC previously published a "Proposed Data Collection Submitted for Public Comment and Recommendations" notice on December 20, 2022, to obtain comments from the public and affected agencies. CDC did not receive comments related to the previous notice. This notice serves to allow an additional 30 days for public and affected agency comments.

CDC will accept all comments for this proposed information collection project. The Office of Management and Budget is particularly interested in comments that:

(a) Evaluate whether the proposed collection of information is necessary for the proper performance of the