

the meeting as an observer should present a copy of this meeting notice and a form of picture identification to the GAO Security Desk on the day of the meeting to obtain access to the GAO Building. Council discussions and reviews are open to the public. Members of the public will be provided an opportunity to address the Council with a brief (five minute) presentation on the afternoon of Tuesday, October 17.

For further information or to notify the Council of your intention to address the Council, please contact Marcia Buchanan, Assistant Director, Government Auditing Standards, 202-512-9321.

**Marcia B. Buchanan,**  
Assistant Director.

[FR Doc. 00-24968 Filed 9-28-00; 8:45 am]

BILLING CODE 1610-02-M

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Office of the Secretary

#### Office of Minority Health; Notice of a Cooperative Agreement With the Asian and Pacific Islander American Health Forum Inc.

**AGENCY:** Office of the Secretary, Office of Minority Health, DHHS.

**ACTION:** Notice of a Single Source Cooperative Agreement with the Asian and Pacific Islander American Health Forum Inc.

*Project Title:* Cooperative Agreement to Improve the Health Status of Minority Populations.

*OMB Catalog of Federal Domestic Assistance:* The Catalog of Federal Domestic Assistance number for this cooperative agreement is 93.004.

*Authority:* This cooperative agreement is authorized under Section 1707 (e)(1) of the Public Health Service Act, as amended.

The Office of Minority Health (OMH), Office of Public Health and Science, announces it is continuing to support a single source umbrella cooperative agreement with the Asian and Pacific Islander American Health Forum, Inc., (APIAHF) for it to expand and enhance its activities in promoting policy, developing community capacity building for health advocacy, providing health and U.S. Census data analysis and information dissemination, and convening regional and national conferences on Asian American and Pacific Islander (AAPI) health to develop action agendas that will address improving the health status of AAPI communities. This cooperative

agreement will continue the broad programmatic framework in which specific projects can be supported by various governmental agencies.

The OMH expects substantial programmatic involvement in this project with the APIAHF to assist in identifying health-related information, including HIV/AIDS; serve as liaison for identifying speakers, facilitators, and consultants for leadership development and training for AAPI communities; and assist in the identification of information on HHS activities, events, and reports for dissemination to the AAPI communities in order to increase their knowledge and involvement.

This cooperative agreement will be continued for an additional 5-year project period with 12-month budget periods. Depending upon the types of projects and availability of funds, it is anticipated that this cooperative agreement will receive approximately \$100,000 per year. The continuation awards within the project period will be made on the basis of satisfactory progress and the availability of funds.

During the last 5 years, APIAHF has successfully demonstrated the ability to work with its partners, including health departments, community-based organizations (CBOs), private sector organizations, and foundations. It has developed leadership skills within AAPI communities and improved technological capacity in CBOs for information dissemination. The OMH believes APIAHF is uniquely qualified to accomplish the purpose of this cooperative agreement and that no organization other than APIAHF could fulfill the program objectives for the reasons cited below. It has:

- Developed and expanded an infrastructure to coordinate the advocacy for various medical intervention and health promotion programs within local communities and service delivery organizations that deal extensively with AAPI health issues.
- Established linkages with leaders and experts in the advocacy, development, and promotion of policies for AAPI health issues.
- Developed the resources and the capability to accurately collect, analyze, and disseminate health and population data on AAPIs to assist in program planning, needs assessment, defining geographic service areas and scope of services, program evaluation, and policy development.
- Promoted leadership development in AAPI communities to address HIV/AIDS prevention and care.
- Established an Asian and Pacific Islander HIV/AIDS Information Network to improve communication channels

with stakeholders, including the AAPI community, researchers, and policy-makers, in order to enhance their awareness of AAPI HIV/AIDS and related issues and to increase the HIV/AIDS programmatic capacities of AAPI organizations.

- Promoted coalition-building and developed health care capacity within local AAPI communities.

### Where To Obtain Additional Information

If you are interested in obtaining additional information regarding this cooperative agreement, contact Ms. Cynthia Amis, Office of Minority Health, 5515 Security Lane, Suite 1000, Rockville, Maryland 20852 or telephone (301) 594-0769.

Dated: September 21, 2000.

**Nathan Stinson, Jr.,**

Deputy Assistant Secretary for Minority Health.

[FR Doc. 00-24969 Filed 9-28-00; 8:45 am]

BILLING CODE 4160-17-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Notice for Comment on the Draft Report of the National Bioethics Advisory Commission (NBAC), Ethical and Policy Issues in International Research

**SUMMARY:** Pursuant to Section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is given for comment on a draft report written by the National Bioethics Advisory Commission (NBAC). The Commission will consider all comments it receives as part of its ongoing deliberations in finalizing this report.

### Purpose of the Report

The purpose of this report is to consider the ethical, legal, and policy issues that arise when research that is subject to U.S. regulations, is sponsored or conducted in other countries. NBAC's goal is to identify these issues and determine whether they are unique to international settings and deserve particular attention from policymakers. In this report NBAC is discussing issues such as: recruitment of subjects, informed consent, and the risks and potential benefits of conducting research. In addition, the Commission comments on the obligations of research sponsors to research participants, communities, and countries before, during, and after a trial. The draft report considers how and to what extent cultural and other factors influence these issues. Finally, NBAC analyzes

many national and international guidelines and statements to make recommendations about possible ways to enhance international collaborative research.

### Providing Comments to the Draft Report

You may provide written comments electronically or through mail or fax. Electronic submissions (by email or by website) are preferred as they will be processed more efficiently. The following are addresses for submitting comments: e-mail: nbac@od.nih.gov, NBAC website: www.bioethics.gov, mail: 6705 Rockledge Drive, Suite 700, Bethesda, Maryland 20892-7979, fax: (301) 480-6900.

If your comments are not postmarked by November 13, 2000, we can not guarantee they will be given full consideration.

*To Receive a Copy of this Draft Report*  
Contact: National Bioethics Advisory Commission, 6705 Rockledge Drive, Suite 700, Bethesda, Maryland 20892-7979, telephone (301) 402-4242, fax number (301) 480-6900, or visit the website at www.bioethics.gov.

**SUPPLEMENTARY INFORMATION:** The President established the National Bioethics Advisory Commission (NBAC) on October 3, 1995 by Executive Order 12975 as amended. The mission of the NBAC is to advise and make recommendations to the National Science and Technology Council, its Chair, the President, and other entities on bioethical issues arising from the research on human biology and behavior, and from the applications of that research.

Dated: September 25, 2000.

**Eric M. Meslin,**

*Executive Director, National Bioethics Advisory Commission.*

[FR Doc. 00-25018 Filed 9-28-00; 8:45 am]

**BILLING CODE 4167-01-P**

### DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### Administration for Children and Families

#### Submission for OMB Review; Comment Request

*Title:* Provision of Services in Interstate Child Support.

OMB No.: 0970-0085.

*Description:* Pub. L. 104-193, The Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) of 1996 amended 42 U.S.C. 666 to require State Child Support Enforcement (CSE) programs to enact the Uniform Interstate Family Support Act (UIFSA) into State law by January 1, 1998. To ensure standardization among States, section 311(b) of UIFSA requires the States to use standard interstate forms, as mandated by Federal law. 45 CFR 303.7 requires CSE programs to transmit child support case information on standard interstate forms when referring cases to other States for processing. The forms, which promote uniformity and standardization, are expiring and we are taking the opportunity to make minor revisions to them, to among other things, reflect that UIFSA is now the law for all 54 CSE programs.

*Respondents:* States.

### ANNUAL BURDEN ESTIMATES

| Instrument                   | Number of respondents | Number of responses per respondent | Average burden hours per response | Total burden hours |
|------------------------------|-----------------------|------------------------------------|-----------------------------------|--------------------|
| Transmittal #1 .....         | 54                    | 10,861.20                          | .42                               | 246,332.02         |
| Transmittal #2 .....         | 54                    | 2,715.30                           | .08                               | 11,730.01          |
| Transmittal #3 .....         | 54                    | 543.05                             | .17                               | 4,985              |
| Uniform Petition .....       | 54                    | 5,430.60                           | .12                               | 35,190.29          |
| General Testimony .....      | 54                    | 6,516.72                           | .33                               | 116,127.95         |
| Affidavit/Paternity .....    | 54                    | 2,715.30                           | .25                               | 36,656.55          |
| Locate Data Sheet .....      | 54                    | 375                                | .08                               | 1,620              |
| Notice/Control Order .....   | 54                    | 8,145.75                           | .17                               | 74,777.98          |
| Registration Statement ..... | 54                    | 7,168.39                           | .17                               | 65,805.82          |

*Estimated Total Annual Burden Hours:* 593,226.

*Additional Information:* Copies of the proposed collection may be obtained by writing to The Administration for Children and Families, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: ACF Reports Clearance officer.

*OMB Comment:* OMB is required to make a decision concerning the collection of information between 30 and 60 days after publication of this document in the **Federal Register**. Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication.

Written comments and recommendations for the proposed

information collection should be sent directly to the following: Office of Management and Budget, Paperwork Reduction Project, 725 17th Street, NW., Washington, DC 20503, Attn: Desk Officer for ACF.

Dated: September 21, 2000.

**Bob Sargis,**

*Reports Clearance Officer.*

[FR Doc. 00-24977 Filed 9-28-00; 8:45 am]

**BILLING CODE 4184-01-M**

### DEPARTMENT OF HEALTH AND HUMAN SERVICES

#### Food and Drug Administration

[Docket No. 94N-0371]

#### Rami Elsharaiha; Debarment Order

**AGENCY:** Food and Drug Administration, HHS.

**ACTION:** Notice.

**SUMMARY:** The Food and Drug Administration (FDA) is issuing an order under the Federal Food, Drug, and Cosmetic Act (the act) permanently debaring Mr. Rami Elsharaiha from providing services in any capacity to a person that has an approved or pending drug product application. FDA bases