

determined by Order to be closely related to banking and permissible for bank holding companies. Unless otherwise noted, these activities will be conducted throughout the United States.

Each notice is available for inspection at the Federal Reserve Bank indicated. The notice also will be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing on the question whether the proposal complies with the standards of section 4 of the BHC Act. Additional information on all bank holding companies may be obtained from the National Information Center website at [www.ffiec.gov/nic/](http://www.ffiec.gov/nic/).

Unless otherwise noted, comments regarding the applications must be received at the Reserve Bank indicated or the offices of the Board of Governors not later than April 21, 2008.

**A. Federal Reserve Bank of Atlanta**  
(David Tatum, Vice President) 1000 Peachtree Street, N.E., Atlanta, Georgia 30309:

1. *Franklin Financial Network, Inc.*; to acquire the assets and assume the liabilities of Banc Compliance Group, LLC, and thereby engage through its wholly-owned subsidiary, Banc Compliance Group, Inc., all of Franklin, Tennessee, in providing management consulting and counseling activities, pursuant to section 225.28(b)(9)(i)(A) of Regulation Y.

Board of Governors of the Federal Reserve System, April 1, 2008.

**Robert deV. Frierson,**

*Deputy Secretary of the Board.*

[FR Doc. E8-7086 Filed 4-4-08; 8:45 am]

**BILLING CODE 6210-01-S**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

[Document Identifier: OS-0990-NEW]

### Agency Information Collection Request: 60-Day Public Comment Request

**AGENCY:** Office of the Secretary, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Office of the Secretary (OS), Department of Health and Human Services, is publishing the following summary of a proposed collection for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, e-mail your request, including your address, phone number, OMB number, and OS document identifier, to [Sherrette.funncoleman@hhs.gov](mailto:Sherrette.funncoleman@hhs.gov), or call the Reports Clearance Office at (202) 690-6162. Written comments and recommendations for the proposed information collections must be directed to the OS Paperwork Clearance Officer

at the above e-mail address within 60 days.

*Proposed Project:* Evaluation of the Afghanistan Health Initiative—OMB No. 0990-NEW—Office of the Assistant Secretary for Planning and Evaluation (ASPE).

*Abstract:* The Offices of Global Health Affairs (OGHA) and the Assistant Secretary for Planning and Evaluation (ASPE), within the U.S. Department of Health and Human Services (HHS), are requesting Office of Management and Budget (OMB) approval for collection of information to evaluate two components of the *Afghanistan Health Initiative (AHI)*. The Afghanistan Health Initiative is authorized by the Afghanistan Freedom Support Act of 2002 [Pub. L. 107-327 section 103(a)]. The *AHI's* goal is to improve maternal and child health and to reduce maternal and child mortality in Afghanistan, primarily through strengthening and updating the knowledge and skills of clinical service providers and managers at the Rabia Balkhi Hospital (RBH) in Kabul. Under the *AHI*, HHS has funded separate cooperative agreements with International Medical Corps (IMC) and CURE International (CURE).

The evaluation includes two approaches for data collection: (1) A set of qualitative interviews with four respondent groups (OB/GYN residents, attending physicians, midwives, and Rabia Balkhi Hospital management staff) and (2) administering a subset of the clinical Standards Based Management (SBM) assessment with two respondent groups (OB/GYN residents and midwives). Estimates of annualized reporting burden are as follows:

ESTIMATED ANNUALIZED BURDEN TABLE

| Forms                                                     | Type of respondent                      | Number of respondents | Number of responses per respondent | Average burden per response (in hours) | Total burden hours |
|-----------------------------------------------------------|-----------------------------------------|-----------------------|------------------------------------|----------------------------------------|--------------------|
| Management Interview Guide .....                          | Management Staff .....                  | 21                    | 1                                  | 30/60                                  | 11                 |
| Clinician Interview Guide .....                           | Attending Physicians .....              | 8                     | 1                                  | 30/60                                  | 4                  |
| Clinician Interview Guide .....                           | 1st-4th Year Resident Physicians ....   | 11                    | 1                                  | 30/60                                  | 6                  |
| Clinician Interview Guide .....                           | Midwives .....                          | 15                    | 1                                  | 30/60                                  | 8                  |
| 1st Year Resident, Standards-Based Management Assessment. | 1st Year Resident physician staff ..... | 31                    | 1                                  | 1.5                                    | 47                 |
| 2nd Year Resident, Standards-Based Management Assessment. | 2nd Year Resident physician staff ....  | 8                     | 1                                  | 1.5                                    | 12                 |
| 3rd Year Resident, Standards-Based Management Assessment. | 3rd Year Resident physician staff ..... | 9                     | 1                                  | 1                                      | 9                  |
| 4th Year Resident, Standards-Based Management Assessment. | 4th Year Resident physician staff ..... | 8                     | 1                                  | 1.5                                    | 12                 |

## ESTIMATED ANNUALIZED BURDEN TABLE—Continued

| Forms                                           | Type of respondent | Number of respondents | Number of responses per respondent | Average burden per response (in hours) | Total burden hours |
|-------------------------------------------------|--------------------|-----------------------|------------------------------------|----------------------------------------|--------------------|
| Midwife, Standards-Based Management Assessment. | Midwives .....     | 75                    | 1                                  | 2                                      | 150                |
| Total .....                                     | .....              | .....                 | .....                              | .....                                  | 259                |

Debbie Kramer,

Office of the Secretary, Paperwork Reduction Act Reports Clearance Officer.

[FR Doc. E8-7242 Filed 4-4-08; 8:45 am]

BILLING CODE 4150-05-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Administration for Children and Families

#### Proposed Information Collection Activity; Comment Request

##### Proposed Project:

Title: Tracking of Participants in the Head Start Impact Study.

OMB No.: 0970-0229.

*Description:* The Administration for Children and Families (ACF) within the Department of Health and Human Services (HHS) will collect follow-up information from children and families in the Head Start Impact Study. In anticipation of conducting an 8th grade follow-up for the study, ACF will collect information necessary to identify respondents' current location and follow-up with respondents in the future.

The Head Start Impact Study is a longitudinal study involving approximately 5,000 first time enrolled three- and four-year-old preschool children across 84 nationally representative grantee/delegate agencies. Participants have been randomly assigned to either a Head Start group or a control group. Data collection

for the study began in fall of 2002 and has been extended through late spring 2008 to include the participants' 3rd grade year.

ACF will continue to examine outcomes for the sample through the spring of the participant's 8th grade year. To maintain adequate sample size, telephone interviews will be conducted in order to update the respondent's location and contact information. This information will be collected from parents or guardians in the spring of 2009, 2010, and 2011. A small set of additional items will provide information on the parents' perception of the children's well-being.

*Respondents:* Treatment and control group members in the Head Start Impact Study.

#### ANNUAL BURDEN ESTIMATES

| Instrument                                | Number of respondents | Number of responses per respondent | Average burden hours per response | Total burden hours |
|-------------------------------------------|-----------------------|------------------------------------|-----------------------------------|--------------------|
| Tracking Interview .....                  | 4,667                 | 1                                  | .25                               | 1,167              |
| Estimated Total Annual Burden Hours ..... | .....                 | .....                              | .....                             | 1,167              |

In compliance with the requirements of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Administration for Children and Families is soliciting public comment on the specific aspects of the information collection described above. Copies of the proposed collection of information can be obtained and comments may be forwarded by writing to the Administration for Children and Families, Office of Planning, Research and Evaluation, 370 L'Enfant Promenade, SW., Washington, DC 20447. Attn: ACF Reports Clearance Officer. E-mail address: [OPREInfoCollection@acf.hhs.gov](mailto:OPREInfoCollection@acf.hhs.gov). All requests should be identified by the title of the information collection.

The Department specifically requests comments 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) 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. Consideration will be given to comments and suggestions submitted within 60 days of this publication.

Dated: March 31, 2008.

Brendan C. Kelly,

OPRE Reports Clearance Officer.

[FR Doc. E8-7138 Filed 4-4-08; 8:45 am]

BILLING CODE 4184-01-M

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Health Resources and Services Administration

#### Organ Procurement and Transplantation Network

**AGENCY:** Health Resources and Services Administration, HHS.

**ACTION:** Correction and extension of deadline date.

**SUMMARY:** The Health Resources Services Administration (HRSA) published a notice in the **Federal Register** of March 3, 2008 (FR Doc. E8-3994), pages 11420-11421, requesting comments to assist in determining whether it should engage in rulemaking with respect to vascularized composite allografts, and also to announce a meeting for discussion and recommendations regarding that issue.

The notice is to extend HRSA's deadline for receiving written comments