proposal also involves the acquisition of a nonbanking company, the review also includes whether the acquisition of the nonbanking company complies with the standards in section 4 of the BHC Act (12 U.S.C. 1843). Unless otherwise noted, nonbanking activities will be conducted throughout the United States. Additional information on all bank holding companies may be obtained from the National Information Center website at www.ffiec.gov/nic/.

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

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

1. Greensburg Bancshares, Inc., to become a bank holding company by acquiring 100 percent of the voting shares of Bank of Greensburg, both of Greensburg, Louisiana.

Board of Governors of the Federal Reserve System January 22, 2008.

Margaret McCloskey Shanks,

Associate Secretary of the Board. [FR Doc. E8-1306 Filed 1-24-08; 8:45 am] BILLING CODE 6210-01-S

DEPARTMENT OF HEALTH AND **HUMAN SERVICES**

National Toxicology Program (NTP); Office of Liaison, Policy and Review; Meeting of the NTP Board of Scientific **Counselors Technical Reports Review** Subcommittee: Amended Notice

AGENCY: National Institute of Environmental Health Sciences (NIEHS), National Institutes of Health (NIH).

ACTION: Change in agenda.

SUMMARY: The February 27-28, 2008, meeting of the NTP Board of Scientific Counselors was announced in the Federal Register (72FR70863) on December 13, 2007. The agenda for the subcommittee meeting has changed. The draft NTP Technical Report on βmyrcene (TR 557) will not be reviewed. The guidelines published in the December 13 notice for submitting public comments or making an oral presentation at the meeting still apply. Any updates to the agenda or additional information and background materials will be posted on the NTP Web site (http://ntp.niehs.nih.gov/go/15833) and provided upon request from the Executive Secretary (see ADDRESSES below).

ADDRESSES: Public comments and any other correspondence should be submitted to Dr. Barbara Shane, Executive Secretary for the NTP Board (NTP Office of Liaison, Policy and Review Office, NIEHS, P.O. Box 12233, MD A3-01, Research Triangle Park, NC 27709; telephone: 919-541-4253, fax: 919–541–0295; or e-mail: shane@niehs.nih.gov).

Dated: January 11, 2008.

Samuel H. Wilson,

Acting Director, National Institute of Environmental Health Sciences and National Toxicology Program.

[FR Doc. E8-1248 Filed 1-24-08; 8:45 am] BILLING CODE 4140-01-P

DEPARTMENT OF HEALTH AND **HUMAN SERVICES**

Centers for Disease Control and Prevention

[30Day-08-07AS]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call the CDC Reports Clearance Officer at (404) 639-5960 or send an email to omb@cdc.gov. Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395-6974. Written comments should be received within 30 days of this notice.

Proposed Project

Focus Group Testing and Survey on Radiological Event Messages for Public Health Workers—New—National Center for Environmental Health (NCEH). Centers for Disease Control and Prevention (CDC).

Background and Brief Description

In January 2003, CDC held a roundtable to specifically address communications needs likely to arise in the aftermath of a terrorist event involving mass casualties. Hospital administrators and clinicians, public health practitioners, and emergency planners emphasized the gaps in their training and in their knowledge of how to respond to nuclear or radiological events.

Concurrent with this, CDC began working with the Association of Schools of Public Health (ASPH) to assess knowledge, attitudes, and behaviors

related to preparedness for a radiological or nuclear terrorist event in the United States. The strong and clear message delivered to the CDC was that both the professional (e.g., clinicians and public health workers) and the lav American public were unprepared to respond to such an event (Becker 2004). Specifically, clinicians who participated in the research acknowledged a lack of training and preparedness, a potential unwillingness to treat patients if they are perceived as radiologically contaminated, and concerns about public panic and consequent overwhelming of hospitals and other clinical systems. More importantly, findings from the meeting revealed a critical need to assess communication preparedness among public health workers in relation to radiological emergencies.

This proposal addresses the need for the development of clear communication messages in the event of a radiological incident. As part of a cooperative agreement, CDC has contracted with the National Public Health Information Coalition (NPHIC) to collect data from public health workers in 6 states—California, Iowa, Kansas, Michigan, North Carolina and South Carolina—to evaluate a set of messages that have been developed by CDC for public health workers to use before, during and after a radiological event. The 5 communication messages focus on the main concerns expressed by representatives from these 6 states and other participants in audience research. The participating states volunteered for this project. Public health workers referenced in this proposal are nurses, physicians, clinical technicians, administrative, management and support staff and epidemiologists.

CDC's primary goal is to protect the health and safety of the public. Since public health workers are usually first responders in various capacities in the event of a radiological emergency, the need to develop time-sensitive and consistent communication messages is vital. Developing clear messages that can be used by public health workers as an integral part of their radiological emergency plan is consistent with this goal. These message concepts, which range from how to protect the worker and family to the role of the public health worker during a radiological emergency will serve as a reference tool and guidance for state health departments in the event of such

situations.

This proposal seeks approval to obtain data using two methods, focus group testing and electronic surveys to achieve greater results. Focus group