| Trans No. | Acquiring | Acquired | Entities |
|---|---|---|---|
| 20072051 | TPF II, L.P | DTE Energy Company | Lincoln Generating Facility, LLC; Lincoln Peaking Power, LLC; Power Energy Partners, LLC. |
| 20072070 | American Electric Power Company, Inc | Dominion Resources, Inc | Dresden Energy, LLC. |
| 20072142 | Siemens Aktiengesellschaft | Dade Behring Holdings, Inc | Dade Behring Holdings, Inc. |
| **TRANSACTIONS GRANTED EARLY TERMINATION—09/18/2007** | | | |
| 20072061 | 3M Company | Lewis S. Cohen | New Horizon Technologies Inc.; Venture Tape Corp.; Venture Tape Europe Corp. |
| 20072087 | Berkshire Hathaway Inc | Burlington Northern Santa Fe Corporation. | Burlington Northern Santa Fe Corporation. |
| **TRANSACTIONS GRANTED EARLY TERMINATION—09/19/2007** | | | |
| 20072039 | Transocean Inc | GlobalSanteFe Corporation | GlobalSanteFe Corporation. |
| 20072075 | Legg Mason Investment Trust, Inc | Exide Technologies | Exide Technologies. |
| **TRANSACTIONS GRANTED EARLY TERMINATION—09/20/2007** | | | |
| 20071973 | HAPC, Inc | I-Flow Corporation | InfuSystem, Inc. |
| 20072103 | American Dental Partners, Inc | Sentinel Capital Partners III, L.P | Metropolitan Dental Holdings, Inc. |
| 20072143 | Positive Investments Pty Ltd | Village Roadshow Entertainment Group (BVI) Limited. | Village Roadshow Entertainment Group (BVI) Limited. |
| **TRANSACTIONS GRANTED EARLY TERMINATION—09/21/2007** | | | |
| 20072144 | Clarity Partners, LP | Village Roadshow Entertainment Group (BVI) Limited. | Village Roadshow Entertainment Group (BVI) Limited. |

**FOR FURTHER INFORMATION CONTACT:** Sandra M. Peay, Contact Representative or Renee Hallman, Contact Representative, Federal Trade Commission, Premerger Notification Office, Bureau of Competition, Room H–303, Washington, DC 20590, (202) 326–3100.

By Direction of the Commission.

**Donald S. Clark**

*Secretary.*

[FR Doc. 07–4889 Filed 10–2–07; 8:45 am]

**BILLING CODE 6750–01–M**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health Submission for OMB Review; Comment Request; Second National Survey To Evaluate the National Institutes of Health (NIH) Small Business Innovation Research (SBIR) Program

*Summary:* Under the provisions of Section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the Office of the Director (OD), Office of Extramural Research (OER) Office of Extramural Programs (OEP), National Institutes of Health (NIH) has submitted to the Office of Management and Budget (OMB) a request to review and approve the information collection listed below. This proposed information collection was previously published in the **Federal Register** on February 15, 2007, pages 7442–7443 and allowed 60-days for public comment. No public comments were received. The purpose of this notice is to allow an additional 30 days for public comment. The National Institutes of Health may not conduct or sponsor, and the respondent is not required to respond to, an information collection that has been extended, revised, or implemented on or after October 1, 1995, unless it displays a currently valid OMB control number.

**Proposed Collection**

*Title:* The Second National Survey to Evaluate the Outcomes of the NIH SBIR Program. Type of Information Collection Request: Reinstatement with changes.

*Need and Use of the Information Collection:* The NIH, Office of the Director, (OD), Office of Extramural Research (OER), Office of Extramural Programs (OEP) will seek OMB approval to reinstate with changes a prior approved collection to conduct a second survey to evaluate the outcomes of the NIH Small Business Innovation Research (SBIR) Program. The SBIR Program, established by Congress in 1982 (Pub. L. 97–219), and reauthorized through September 30, 2008 (Pub. L. 106–554; 15 U.S.C. § 638), provides research support to small businesses for innovative technology. OMB approved the information collection associated with the initial National Survey to Evaluate the NIH SBIR Program on March 15, 2002 (OMB Control No. 0925–0499), expiration April 30, 2003. Through the first National Survey to Evaluate the NIH SBIR Program, NIH was able to obtain data demonstrating significant SBIR programmatic results. For example, seventy-three percent of the 768 awardee respondents reported commercializing new or improved products, processes, usages, and/or services in health-related fields. Other evidence of commercialization from the survey were that SBIR projects developed 48 drugs and medical devices receiving FDA approval; 281 awardees received additional funding from non-SBIR sources; and 436 awardees engaged in ongoing or completed marketing activities.

NIH will seek OMB approval to reinstate this information collection with changes with the primary objective to assess the extent to which the SBIR program goals continue to be met, particularly those dealing with the commercialization of research products, processes or services and the uncovering of new knowledge that will lead to better health for everyone. With outcome data, NIH will be able to more accurately assess the results of its large financial investment in funding innovative research conducted by small business concerns. Findings will help NIH to (1) understand if innovative

projects supported through the NIH SBIR Program are being commercialized and if so, to classify the types of products, processes or services that are derived through SBIR funding; (2) determine if other measures of success defined within the NIH mission are being achieved; and (3) enhance NIH's administration of the SBIR Program and the support that it provides to small business concerns. Overall, the NIH will use the evaluation results to assess the outcomes from NIH-supported SBIR awards. The evaluation results will provide OD with the information necessary to make quality improvements to the SBIR program and enhance program performance in generating significant outcomes. The Government Performance and Results Act of 1993 (GPRA) mandates that Federal programs improve their effectiveness and public accountability by focusing on results. The OMB developed the Program Assessment Rating Tool (PART) to monitor compliance with the GPRA and to rate federal programs for their effectiveness and ability to show results. It is anticipated that results from a second survey will assist NIH in demonstrating that it is meeting its GPRA goals for the NIH SBIR Program. Using an Internet survey OD will collect information Phase II SBIR awardees from fiscal years (FY) 2002 through 2006. The online survey will be implemented using Secure Socket Layer (SSL) encryption technology and password access. OD will use email messages to advise awardees that they have been selected to participate in the survey.

*Frequency of Response:* One time.

*Affected Public:* Small business concerns supported by NIH through the SBIR Program.

*Type of Respondents:* For-profit small business concerns that received an NIH SBIR Phase II award from (FY 2002–2006). The annual reporting burden is as follows:

*Estimated Number of Respondents:* 704; *Estimated Number of Responses per Respondent:* 1; *Averaged Burden Hours per Response:* .5; and *Estimated Total Annual Burden Hours Requested:* 352. The annualized cost to the public is estimated at $26,400. There are no Capital Costs, Operating Costs and/or Maintenance Costs to report. The anticipated maximum number of respondents is smaller than that in the initial survey thus decreasing the annual hour burden and the annualized cost to the respondents.

| Type of respondents | Estimated number of respondents | Estimated number of responses per respondent | Average burden hours per response | Estimated total annual burden hours requested |
|---|---|---|---|---|
| For-profit small business concerns that have received an NIH SBIR Phase II award from (FY 2002–2006) | 704 | 1 | 0.5 | 352 |

**Requests for Comments**

Written comments and/or suggestions from the public and affected agencies should address one or more of the following points: (1) Whether the proposed collection of information is necessary for the proper performance of the function of the agency, including whether the information will have practical utility; (2) 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) Ways to enhance the quality, utility, and clarity of the information to be collected; and (4) Ways to minimize the burden of the collection of information on those who are to respond, including the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

*Direct Comments to OMB:* Written comments and/or suggestions regarding the item(s) contained in this notice, especially regarding the estimated public burden and associated response time, should be directed to the: Office of Management and Budget, Office of Regulatory Affairs, New Executive Office Building, Room 10235, Washington, DC 20503, Attention: Desk Officer for NIH. To request more information on the proposed project or to obtain a copy of the data collection plans and instruments, contact: Ms. Jo Anne Goodnight, NIH SBIR/STTR Program Coordinator, Rockledge I Bldg., Room 3538, 6705 Rockledge Drive, Bethesda, MD 20892–7910, or call non-toll-free number 301–435–2688 or e-mail your request, including your address, to: *jg128w@nih.gov* .

*Comments Due Date:* Comments regarding this information collection are best assured of having their full effect if received within 30 days of the date of this publication.

Dated: September 25, 2007.

**Jo Anne Goodnight,**

*Coordinator, Small Business Innovation Research/Small Business Technology Transfer Program; Office of Extramural Programs, Office of Extramural Research, Office of the Director, National Institutes of Health.*

[FR Doc. E7–19465 Filed 10–2–07; 8:45 am]

**BILLING CODE 4140–01–P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

**[Document Identifier: OS–0990–New; 30-Day Notice]**

### Agency Information Collection Request; 30-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 *Sherette.funncoleman@hhs.gov*, or call the Reports Clearance Office on (202) 690–6162. Written comments and recommendations for the proposed information collections must be received within 30 days of this notice directly to the OS OMB Desk Officer all comments must be faxed to OMB at 202–395–6974.