

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.

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 8, 2011.

A. Federal Reserve Bank of Philadelphia (Michael E. Collins, Senior Vice President) 100 North 6th Street, Philadelphia, Pennsylvania 19105–1521:

1. *Bryn Mawr Bank Corporation*, Bryn Mawr, Pennsylvania; to acquire PWMG Bank and Trust, Inc., Hersey Pennsylvania, a *de novo* non-depository trust company, and thereby engage in trust company activities, pursuant to section 225.28(b)(4)(ii) of Regulation Y.

Board of Governors of the Federal Reserve System, March 21, 2011.

Robert deV. Frierson,

Deputy Secretary of the Board.

[FR Doc. 2011–6951 Filed 3–23–11; 8:45 am]

BILLING CODE 6210–01–P

GENERAL SERVICES ADMINISTRATION

[GSA Bulletin FTR 11–05; 2011–0002; Sequence 2]

Federal Travel Regulation (FTR); Relocation Allowances—Relocation Income Tax Allowance (RITA) Tables

AGENCY: Office of Governmentwide Policy, General Services Administration (GSA).

ACTION: Notice of a bulletin.

SUMMARY: The purpose of this notice is to inform agencies of FTR Bulletin 11–05, which provides the annual changes to the RIT allowance tables necessary for calculating the amount of a transferee's increased tax burden due to an employee's official permanent change of station is now available. FTR Bulletin 11–05 and all other FTR Bulletins can be found at <http://www.gsa.gov/ftrbulletin>. The RIT allowance tables are located at <http://www.gsa.gov/relocationpolicy>.

DATES: This notice is effective March 24, 2011.

FOR FURTHER INFORMATION CONTACT: Mr. Ed Davis, Office of Governmentwide Policy (M), Office of Travel, Transportation, and Asset Management (MT), General Services Administration at (202) 208–7638 or via e-mail at ed.davis@gsa.gov. Please cite FTR Bulletin 11–05.

SUPPLEMENTARY INFORMATION: On June 25, 2008 the General Services Administration (GSA) published FTR Amendment 2008–04 in the **Federal Register** (73 FR 35952) specifying that the General Services Administration (GSA) would no longer publish the RITA tables found in 41 CFR part 301–17 Appendices A through D. The tables will be published at <http://www.gsa.gov/relocationpolicy>.

Dated: March 21, 2011.

Janet Dobbs,

Director, Office of Travel, Transportation & Asset Mgmt.

[FR Doc. 2011–6968 Filed 3–23–11; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30-Day–11–0775]

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 e-mail to omb@cdc.gov. Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395–5806. Written comments should be received within 30 days of this notice.

Proposed Project

Formative Research to Develop Social Marketing Campaigns—Routine HIV Testing for Emergency Medicine Physicians, *Prevention Is Care (PIC)*, and Partner Services—Extension—(0920–0775, expiration 4–30–2011) National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (NCHHSTP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

This project involves continuing a formative research study to support CDC's efforts in further developing three social marketing campaigns targeting infectious disease specialists, primary care physicians, and emergency department physicians. The campaigns of focus are: Routine HIV Testing, Prevention Is Care (*PIC*) and Partner

Services. The goal of the Routine HIV Testing Campaign is to increase HIV testing rates among individuals who receive care through the emergency department and the objective of the campaign is to make HIV testing a routine part of care provided by emergency medicine physicians. PIC entails encouraging primary care physicians (PCP) and Infectious Disease Specialists who deliver care to patients living with HIV to screen their HIV patients for HIV transmission behaviors and deliver brief messages on the importance of protecting themselves and others by reducing their risky behaviors. The long-term objective of the campaign is to establish *PIC* as the standard of care for persons living with HIV. The goal of the Partner Services component of the PIC social marketing campaign is to make HIV partner services a routine part of medical care. Partner services will greatly enhance the detection and early referral of individuals with HIV infection and will greatly reduce the number of new infections. The study entails conducting the remaining interviews to test creative materials with a sample of emergency medicine physicians for Routine HIV Testing and with PCP and Infectious Disease Specialists for *PIC* and Partner Services. Findings from this study will be used by CDC and its partners to inform current and future program activities.

For Routine HIV Testing, we have conducted a total of 48 interviews and have 24 remaining interviews to conduct. We expect a total of 12 physicians to be screened annually for eligibility. Of the 12 physicians who are screened annually, we expect that 8 will participate in an interview annually.

For PIC, we have conducted 18 interviews and have 144 remaining interviews to conduct. We expect a total of 72 physicians to be screened annually for eligibility. Of the 72 physicians who are screened, we expect that 48 will participate in an interview annually.

For Partner Services, we have conducted 96 interviews and have 78 remaining interviews to conduct. We expect a total of 39 physicians to be screened annually for eligibility. Of the 39 physicians who are screened, we expect that 26 will participate in an interview annually.

There are no costs to the respondents other than their time. The total estimated annual burden hours are 115.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondent	Form name	Number of respondents	Number of responses per respondent	Average burden response (in hours)
Emergency Medicine Physicians	Routine HIV Testing Screener	12	1	10/60
Emergency Medicine Physicians	Routine HIV Testing Interview	8	1	1
Emergency Medicine Physicians	Routine HIV Paper & Pencil Survey	8	1	10/60
Prevention Is Care	PIC Screener	72	1	10/60
Prevention Is Care	PIC Interview	48	1	1
Prevention Is Care	PIC Paper & Pencil Survey	48	1	10/60
Partner Services	Screener	39	1	10/60
Partner Services	Interview	26	1	1
Partner Services	Paper & Pencil Survey	26	1	10/60

Daniel Holcomb,

Reports Clearance Officer, Centers for Disease Control and Prevention.

[FR Doc. 2011-6936 Filed 3-23-11; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review; Comment Request

Title: Required Data Elements for Paternity Establishment Affidavits.
OMB No.: 0970-0171.

Description: Section 466(a)(5)(C)(iv) of the Social Security Act the Act) requires States to develop and use an affidavit for the voluntary acknowledgement of

paternity. The affidavit for the voluntary acknowledgement of paternity must include the minimum requirements specified by the Secretary under section 452(a)(7) of the Act. The affidavits will be used by hospitals, birth record agencies, and other entities participating in the voluntary paternity establishment program.

Respondents: State and Tribal IV-D agencies, hospitals, birth record agencies and other entities participating in the voluntary paternity establishment program.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Acknowledgments	1,167,097	1	0.17	198,406.49
Estimated Total Annual Burden Hours:	198,406.49

Additional Information: Copies of the proposed collection may be obtained by writing to the Administration for Children and Families, Office of Administration, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer. All requests should be identified by the title of the information collection. E-mail address: infocollection@acf.hhs.gov.

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.
Fax: 202-395-7285.

E-mail:

OIRA_SUBMISSION@OMB.EOP.GOV.

Attn: Desk Officer for the Administration for Children and Families.

Robert Sargis,

Reports Clearance Officer.

[FR Doc. 2011-6947 Filed 3-23-11; 8:45 am]

BILLING CODE 4184-01-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children And Families

Announcement of an Award

AGENCY: Office of Policy, Research and Evaluation, ACF, HHS.

ACTION: The Administration for Children and Families (ACF) announces the award of a cooperative agreement to the Congressional Hunger Center in Washington, DC.

C.F.D.A. Number: 93.647.

Statutory Authority: The award is authorized under Section 1110 of the Social Security Act, 42 U.S.C. 613.

SUMMARY: The Administration for Children and Families (ACF), Office of the Deputy Assistant Secretary and Inter-Departmental Liaison for Early Childhood Development announces the award of a cooperative agreement with the Congressional Hunger Center (CHC) in Washington, DC, to work with ACF programs on hunger and obesity issues for young children. An award in the amount of \$3,000 has been made to the CHC.

DATES: March 15, 2011–August 1, 2011.

FOR FURTHER INFORMATION CONTACT:

George Askew, MD, FAAP, Senior Policy Advisor for Early Childhood Health and Development, Office of the Deputy Assistant Secretary and Inter-Departmental Liaison for Early Childhood Development, 901 D Street, SW., Washington, DC 20447. *Telephone:*