

Dated: December 29, 2008.

**W. Michael McDavit,**

*Acting Director, Biopesticides and Pollution Prevention Division, Office of Pesticide Programs.*

[FR Doc. E9-120 Filed 1-7-09; 8:45 am]

**BILLING CODE 6560-50-S**

## FEDERAL COMMUNICATIONS COMMISSION

[Report No. 2880]

### Petition for Reconsideration of Action in Rulemaking Proceeding

December 22, 2008.

A Petition for Reconsideration has been filed in the Commission's Rulemaking proceeding listed in this Public Notice and published pursuant to 47 CFR Section 1.429(e). The full text of this document is available for viewing and copying in Room CY-B402, 445 12th Street, SW., Washington, DC or may be purchased from the Commission's copy contractor, Best Copy and Printing, Inc. (BCPI) (1-800-378-3160). Oppositions to this petition must be filed by January 23, 2009. See Section 1.4(b)(1) of the Commission's rules (47 CFR 1.4(b)(1)). Replies to an opposition must be filed within 10 days after the time for filing oppositions have expired.

*Subject:* In the Matter of An Inquiry into the Commission's Policies and Rules Regarding AM Radio Service Directional Antenna Performance Verification (MM Docket No. 93-177).

*Number of Petitions Filed:* 1.

**Marlene H. Dortch,**  
*Secretary.*

[FR Doc. E9-142 Filed 1-7-09; 8:45 am]

**BILLING CODE 6712-01-P**

## FEDERAL DEPOSIT INSURANCE CORPORATION

### Notice of Agency Meeting

Pursuant to the provisions of the "Government in the Sunshine Act" (5 U.S.C. 552b), notice is hereby given that at 10:07 a.m. on Tuesday, January 6, 2009, the Board of Directors of the Federal Deposit Insurance Corporation met in closed session to consider matters relating to the Corporation's resolution activities.

In calling the meeting, the Board determined, on motion of Director Thomas J. Curry (Appointive), seconded by Vice Chairman Martin J. Gruenberg, concurred in by Director John M. Reich (Director, Office of Thrift Supervision), Ms. Julie L. Williams, acting in the place

and stead of Director John C. Dugan (Comptroller of the Currency), and Chairman Sheila C. Bair, that Corporation business required its consideration of the matters on less than seven days' notice to the public; that no earlier notice of the meeting was practicable; that the public interest did not require consideration of the matters in a meeting open to public observation; and that the matters could be considered in a closed meeting by authority of subsections (c)(4), (c)(6), (c)(8), (c)(9)(A)(ii) and (c)(9)(B) of the "Government in the Sunshine Act" (5 U.S.C. 552b(c)(4), (c)(6), (c)(8), (c)(9)(A)(ii), and (c)(9)(B)).

The meeting was held in the Board Room of the FDIC Building located at 550-17th Street, NW., Washington, DC.

Dated: January 6, 2009.

Federal Deposit Insurance Corporation.

**Valerie J. Best,**

*Assistant Executive Secretary.*

[FR Doc. E9-274 Filed 1-6-09; 4:15 pm]

**BILLING CODE 6714-01-P**

## FEDERAL RESERVE SYSTEM

### Formations of, Acquisitions by, and Mergers of Bank Holding Companies

The companies listed in this notice have applied to the Board for approval, pursuant to the Bank Holding Company Act of 1956 (12 U.S.C. 1841 *et seq.*) (BHC Act), Regulation Y (12 CFR Part 225), and all other applicable statutes and regulations to become a bank holding company and/or to acquire the assets or the ownership of, control of, or the power to vote shares of a bank or bank holding company and all of the banks and nonbanking companies owned by the bank holding company, including the companies listed below.

The applications listed below, as well as other related filings required by the Board, are available for immediate inspection at the Federal Reserve Bank indicated. The applications also will be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing on the standards enumerated in the BHC Act (12 U.S.C. 1842(c)). If the 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/](http://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 2, 2009.

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

1. *Tower Bancorp, Inc.*, Greencastle, Pennsylvania, to merge with Graystone Financial Corporation Corp., Lancaster, Pennsylvania, and thereby indirectly acquire The First National Bank of Greencastle, Greencastle, Pennsylvania, and Graystone Bank, Lancaster, Pennsylvania.

**B. Federal Reserve Bank of Chicago** (Burl Thornton, Assistant Vice President) 230 South LaSalle Street, Chicago, Illinois 60690-1414:

1. *City State Bancorporation, Inc.*, Central City, Iowa, to become a bank holding company by acquiring 51.3 percent of the voting shares of MSB Corporation, and thereby indirectly acquire voting shares of City State Bank, both of Central City, Iowa.

Board of Governors of the Federal Reserve System, January 5, 2009.

**Jennifer J. Johnson,**

*Secretary of the Board.*

[FR Doc. E9-00097 Filed 1-7-09; 8:45 am]

**BILLING CODE 6210-01-S**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

[30Day-09-08BH]

### 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](mailto: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

Health survey of former Marines, dependents, and employees potentially

exposed to contaminated drinking water at USMC Camp Lejeune—New—Agency for Toxic Substances and Disease Registry (ATSDR), Coordinating Center for Environmental Health and Injury Prevention (CCEHIP), Centers for Disease Control and Prevention (CDC).

#### *Background and Brief Description*

On January 28, 2008, President Bush signed H.R. 4986: National Defense Authorization Act for Fiscal Year 2008 which requires ATSDR to develop a health survey of individuals possibly exposed to contaminated drinking water at Camp Lejeune. The survey will collect personal health information that may provide a basis for further reliable scientific studies of potentially adverse health impacts of exposure to contaminated water at Camp Lejeune. The Act requires the survey to be developed within 120 days of enactment and to be conducted within one year of enactment.

Additionally, in 2005, a panel of independent scientists convened by ATSDR to explore opportunities for conducting additional health studies at Camp Lejeune recommended that the agency:

- Identify cohorts of individuals with potential exposure, including adults who lived on base; adults who resided off base, but worked on base; children who lived on base; and those who may have been exposed while in utero; and
- Conduct a feasibility assessment to address the issues involved in planning future studies of mortality, cancer incidence, and other health outcomes of interest at the base.

In response, ATSDR prepared a report on the feasibility of conducting future epidemiological studies at the base. ATSDR determined that available databases could be used to identify adults who lived at the base or civilians who worked at the base during the period when drinking water was contaminated with volatile organic compounds (VOCs).

In addition to questions on cancers, the health survey will include questions on non-fatal diseases that can be confirmed by medical records and are known or suspected of being associated with solvent exposures.

This project proposes to examine the relationship between medically confirmed cancers and trichloroethylene- (TCE) or perchloroethylene- (PCE) contaminated drinking water by mathematically modeling the exposure to contaminated drinking water while living or working at Camp Lejeune.

The relationship between the following non-fatal diseases that can be confirmed by medical records and TCE- or PCE-contaminated drinking water will also be examined: Parkinson's disease, kidney failure and other severe kidney diseases, severe liver diseases, lupus, aplastic anemia, TCE-related skin disorders, scleroderma, multiple sclerosis, motor neuron disease/ amyotrophic lateral sclerosis, and infertility. In addition, the health survey will include questions on miscarriages occurring to women who were pregnant while residing or working on base.

The health survey will request information about the type of cancer or

non-fatal, non-cancer disease, date of diagnosis, hospital of diagnosis, and doctor who diagnosed the disease to facilitate the acquisition of medical record confirmation. Because medical records are usually unavailable for miscarriages, the survey will not request information to facilitate medical record confirmation of this adverse outcome. For cancers, state of diagnosis will also be obtained to facilitate acquisition of cancer registry data. Self-reported cancers and other diseases will be confirmed by medical records or cancer registrations. To facilitate medical record confirmation, the participant will be asked to provide a copy of the medical record to ATSDR or to sign a medical records release form allowing ATSDR to gain access to the medical record. The survey will also collect information on residential history on base, occupational history, and information on several risk factors (*e.g.*, socio-economic status, demographics, smoking, alcohol consumption, etc.). A space will also be provided so that the respondent can report other disease conditions. The collected information will be used to assign exposure status and to assess potential confounding.

To improve the credibility of the study, it is necessary to include an external, unexposed comparison group, similar in all respects to the Marines and civilian workers at Camp Lejeune except for exposure to VOC-contaminated drinking water.

There are no costs to the respondents other than their time.

The estimated annualized burden hours are 58,012.

#### ESTIMATED ANNUALIZED BURDEN HOURS

Respondents	No. of respondents	No. of responses per respondent	Average burden per response (in hours)
Former active duty marines and navy personnel—Camp Lejeune .....	45,500	1	45/60
Former civilian workers—Camp Lejeune .....	1,733	1	45/60
Former dependents (now all adults) and former Marines who were stationed at Camp Lejeune prior to 1975—Camp Lejeune .....	6,283	1	45/60
Former active duty marines and navy personnel—Camp Pendleton (comparison group) .....	10,833	1	45/60
Former civilian workers—Camp Pendleton (comparison group) .....	2,167	1	45/60
"Registered" group .....	10,833	1	45/60

Dated: January 2, 2009.  
**Maryam I. Daneshvar,**  
*Acting Reports Clearance Officer, Centers for Disease Control and Prevention.*  
[FR Doc. E9–95 Filed 1–7–09; 8:45 am]  
BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention  
[60Day–09–09AK]

Proposed Data Collections Submitted for Public Comment and Recommendations

In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, the Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call 404–639–5960 and send comments to Maryam I. Daneshvar, CDC Acting Reports Clearance Officer, 1600 Clifton Road, MS–D74, Atlanta, GA 30333 or send an e-mail to [omb@cdc.gov](mailto:omb@cdc.gov).  
Comments are invited 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) ways to enhance 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, including through the use of automated collection techniques or other forms of information technology. Written comments should be received within 60 days of this notice.  
**Proposed Project**  
Audience Analysis for Environmental Health Issues,—New—National Center for Environmental Health/Agency for Toxic Substances and Disease Registry (NCEH/ATSDR), Centers for Disease Control and Prevention (CDC).  
*Background and Brief Description*  
The health effects associated with climate change include injuries and fatalities related to severe weather events and heat waves, infectious diseases related to changes in vector biology, water and food contamination, and respiratory illness due to increased allergen production. Despite these potentially devastating public health consequences, few in the general public connect climate change with health effects. In general, the majority of Americans associate climate change with nonhuman impacts and environmental problems rather than health effects. Most therefore focus their concern on the connection between climate change and plant and animal extinction rather than the impact on human health. Thus, it is not surprising that few in the general public are well prepared to deal with climate change health effects. The Centers for Disease Control and Prevention (CDC) is interested in developing communication materials to increase the public’s

awareness, knowledge and prepare for the potential health effects associated with climate change. To this end, focus groups will be conducted with members of a local California community to understand motivations and factors influencing target audience’s decision process. There will also be an emphasis on the health effects, framing devices, and channels that might be most effective for disseminating public health messages and having them motivate the intended audiences. With that in hand it will be possible to identify the most valuable information and optimal strategies for communicating with target audiences.  
Focus groups will be conducted with the residents of Santa Rosa, California. During phase one, three exploratory focus groups will be conducted to develop messaging strategies. Results from the exploratory focus groups will be used in the development of preliminary messaging strategies and draft materials. This material will be tested with the target audience during the second phase of research. The second phase will include three materials testing focus groups to determine which materials and messages are most attractive and compelling in terms of educating the public about health effects and promoting preparedness behaviors. Participants will be recruited via standard focus group recruitment methods. Most will come from an existing database (or list) of potential participants maintained by the focus group facility or recruited through local newspapers.  
There is no cost to respondents.

ESTIMATED ANNUALIZED BURDEN HOURS

Respondents	No. of respondents	No. of responses per respondent	Average burden per response (in hours)	Total burden (in hours)
Recruitment screener .....	108	1	5/60	9
Exploratory Focus Groups .....	27	1	2	54
Materials Testing Focus Groups .....	27	1	2	54
Total .....	162	.....	.....	117

Date: December 29, 2009.  
**Marilyn S. Radke,**  
*Reports Clearance Officer, Centers for Disease Control and Prevention.*  
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BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Centers for Disease Control and Prevention  
Advisory Council for the Elimination of Tuberculosis Meeting (ACET)

In accordance with section 10(a)(2) of the Federal Advisory Committee Act

(Pub. L. 92–463), the Centers for Disease Control and Prevention (CDC), announces the following meeting of the aforementioned committee:  
*Times and Dates:*  
8:30 a.m.–5:30 p.m., March 3, 2009.  
8:30 a.m.–2 p.m., March 4, 2009.  
*Place:* Corporate Square, Building 8, 1st Floor Conference Room, Atlanta, Georgia 30333, telephone (404) 639–8317.