securities brokerage activities; trust company functions, and the sale of credit life insurance, pursuant to §§ 225.28(b)(4), (b)(7), (b)(5), and (b)(11) of the Board's Regulation Y, respectively.

- 2. National Australia Bank Limited, Melbourne, Australia; to acquire Homeside, Inc., Jacksonville, Florida, and thereby indirectly acquire Homeside Lending, Inc., Jacksonville, Florida, and thereby engage in extending credit and servicing loans and activities related to extending credit, pursuant §§ 225.28(b)(1) and 225.28(b)(2) of the Board's Regulation Y. Comments on this application must be received by December 26, 1997.
- **B. Federal Reserve Bank of St. Louis** (Randall C. Sumner, Vice President) 411 Locust Street, St. Louis, Missouri 63102-2034:
- 1. Mercantile Bancorporation Inc., St. Louis, Missouri; to acquire HomeCorp, Inc., Rockford, Illinois, and thereby indirectly acquire HomeBanc FSB, Rockford, Illinois, and thereby engage in the operation of a savings association, pursuant to § 225.28(b)(4)(ii) of the Board's Regulation Y.

Board of Governors of the Federal Reserve System, December 8, 1997.

Jennifer J. Johnson,

Deputy Secretary of the Board. [FR Doc. 97–32442 Filed 12–10–97; 8:45 am] BILLING CODE 6210–01–F

FEDERAL RESERVE SYSTEM

Sunshine Act Meeting

AGENCY HOLDING THE MEETING:

Committee on Employee Benefits of the Federal Reserve System*.

TIME AND DATE: 2:30 p.m., Tuesday, December 16, 1997.

PLACE: Marriner S. Eccles Federal Reserve Board Building, 20th and C Streets, N.W., Washington, D.C. 20551. STATUS: Closed.

MATTERS TO BE CONSIDERED:

- 1. Proposals relating to Federal Reserve System benefits.
- 2. Personnel actions (appointments, promotions, assignments, reassignments, and salary actions) involving individual Office of Employee Benefits employees.
- 3. Any items carried forward from a previously announced meeting.
- * The Committee on Employee Benefits considers matters relating to the Retirement, Thrift, Long-Term Disability Income, and Insurance Plans for employees of the Federal Reserve System.

CONTACT PERSON FOR MORE INFORMATION: Joseph R. Coyne, Assistant to the Board; 202–452–3204.

SUPPLEMENTARY INFORMATION: You may contact the Board's Web site at http://www.bog.frb.fed.us for an electronic announcement of this meeting. (The Web site also includes procedural and other information about the meeting.)

Dated: December 9, 1997.

William W. Wiles,

Secretary of the Board. [FR Doc. 97–32585 Filed 12–9–97; 2:13 pm] BILLING CODE 6210–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Advisory Commission on Consumer Protection and Quality in the Health Care Industry; Notice of Public Meeting

In accordance with Section 10(a)(2) of the Federal Advisory Committee Act, Public Law 92–463, notice is hereby given of the meeting of the Advisory Commission on Consumer Protection and Quality in the Health Care Industry. This two-day meeting will be open to the public, limited only by the space available.

Place of meeting: Omni Shoreham Hotel, 2500 Calvert Street, N.W., Washington, D.C. 20008. Exact locations of the sessions will be available at the registration area and on the Commission's web site, "http://www.hcqualitycommission.gov".

Times and Dates: The public meeting will span two days. On Tuesday, December 16, 1997, the subcommittee break-out sessions will take place from 8:30 a.m. until 4:30 p.m. On Wednesday, December 17, 1997, the general plenary session will begin at 8:00 a.m. and it will continue until 4:00 p.m.

Purpose/Agenda: To hear testimony and continue formal proceedings of the Commission and the three (3) remaining subcommittees (Subcommittee on Consumer Rights has completed its work). Agenda items are subject to change as priorities dictate.

Contact Person: For more information, including substantive program information and summaries of the meeting, please contact: Edward (Chip) Malin, Hubert Humphrey Building, Room 118F, 200 Independence Avenue, S.W., Washington, DC 20201; (202/205–3333).

Dated: December 3, 1997.

Janet Corrigan,

Executive Director, Advisory Commission on Consumer Protection and Quality in the Health Care Industry.

[FR Doc. 97–32361 Filed 12–10–97; 8:45 am] BILLING CODE 4110–60–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[INFO-98-06]

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 the CDC Reports Clearance Officer on (404) 639–7090.

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 for other forms of information technology. Send comments to Wilma Johnson, CDC Reports Clearance Officer, 1600 Clifton Road, MS-D24, Atlanta, GA 30333. Written comments should be received within 60 days of this notice.

Proposed Projects

1. National Hospital Ambulatory Medical Care Survey—(0920–0278)-Extension—The National Hospital Ambulatory Medical Care Survey (NHAMCS) has been conducted annually since 1992 by the Division of Health Care Statistics, National Center for Health Statistics, CDC. The NHAMCS is the principal source of data on the approximately 158 million visits to hospital emergency and outpatient departments and is the only source of nationally representative estimates on the demographic characteristics of outpatients, diagnoses, diagnostic services, medication therapy, and the patterns of use of care in hospitals which differ in size, location, and ownership. Additionally, the NHAMCS is the only source of national estimates on non-fatal causes of injury in the emergency department.