

consumers' interests and, at the same time, will ensure that its rules do not inadvertently inhibit routine business transactions.

Federal Communications Commission.

Magalie Roman Salas,
Secretary.

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FEDERAL DEPOSIT INSURANCE CORPORATION

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Federal Deposit Insurance Corporation (FDIC).

ACTION: Notice and request for comment.

SUMMARY: The FDIC, as part of its continuing effort to reduce paperwork and respondent burden, invites the general public and other Federal agencies to take this opportunity to comment on proposed and/or continuing information collections, as required by the Paperwork Reduction Act of 1995 (44 U.S.C. chapter 35). Currently, the FDIC is soliciting comments concerning an information collection titled "Management Official Interlocks."

DATES: Comments must be submitted on or before August 20, 2001.

ADDRESSES: Interested parties are invited to submit written comments to Tamara R. Manly, Management Analyst (Regulatory Analysis), (202) 898-7453, Office of the Executive Secretary, Room F-4058, Attention: Comments/OES, Federal Deposit Insurance Corporation, 550 17th Street N.W., Washington, D.C. 20429. All comments should refer to "Management Official Interlocks." Comments may be hand-delivered to the guard station at the rear of the 17th Street Building (located on F Street), on business days between 7:00 a.m. and 5:00 p.m. [FAX number (202) 898-3838; Internet address: comments@fdic.gov]. Comments may also be submitted to the OMB desk officer for the FDIC: Alexander Hunt, Office of Information and Regulatory Affairs, Office of Management and Budget, New Executive Office Building, Room 3208, Washington, D.C. 20503.

FOR FURTHER INFORMATION CONTACT: Tamara R. Manly, at the address identified above.

SUPPLEMENTARY INFORMATION: Proposal to renew the following currently approved collection of information:

Title: Management Official Interlocks.

OMB Number: 3064-0118.

Frequency of Response: On occasion.

Affected Public: Management officials of insured nonmember banks and their affiliates.

Estimated Number of Respondents: 5.

Estimated Time per Response: 4 hours.

Estimated Total Annual Burden: 20 hours.

General Description of Collection: The collection is associated with the FDIC's Management Official Interlocks regulation, 12 CFR Part 348, which implements the Depository Institution Management Interlocks Act (DIMIA). DIMIA generally prohibits bank management officials from serving simultaneously with two unaffiliated depository institutions or their holding companies but allows the FDIC to grant exemptions in appropriate circumstances.

Request for Comment

Comments are invited on: (a) Whether the collection of information is necessary for the proper performance of the FDIC's functions, including whether the information has practical utility; (b) the accuracy of the estimates of the burden of the information collection, including the validity of the methodology and assumptions used; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the information collection on respondents, including through the use of automated collection techniques or other forms of information technology.

At the end of the comment period, the comments and recommendations received will be analyzed to determine the extent to which the collection should be modified prior to submission to OMB for review and approval. Comments submitted in response to this notice also will be summarized or included in the FDIC's requests to OMB for renewal of this collection. All comments will become a matter of public record.

Dated at Washington, D.C., this 15th day of June, 2001.

Federal Deposit Insurance Corporation.

Robert E. Feldman,

Executive Secretary.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day-01-48]

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 or other forms of information technology. Send comments to Anne O'Connor, CDC Assistant Reports Clearance Officer, 1600 Clifton Road, MS-D24, Atlanta, GA 30333. Written comments should be received within 60 days of this notice.

Proposed Project

The National Death Index (NDI)—Renewal—National Center for Health Statistics (NCHS), Centers for Disease Control and Prevention (CDC). The National Death Index (NDI) is a service of the National Center for Health Statistics that assists health and medical researchers determine the vital status of their study subjects. The NDI is a national data base containing identifying death record information submitted annually to NCHS by all the state vital statistics offices, beginning with deaths in 1979. Searches against the NDI file provide the states and dates of death and the death certificate numbers of deceased study subjects. With the recent implementation of the NDI Plus service, researchers now have the option of also receiving cause of death information for deceased subjects, thus reducing the need to request copies

of death certificates from the states. The NDI Plus option currently provides the ICD codes for the underlying and multiple causes of death for the years

1979–1999. The five administrative forms are completed by health researchers in government, universities, and private industry in order to apply

for NDI services and to submit records of study subjects for computer matching against the NDI file. The total cost to respondents is estimated at \$5,685.

Respondents	No. of respondents	No. of responses/respondents	Avg. burden/response (in hrs.)	Total burden (in hrs.)
Government researchers	48	1	1.89	91
University researchers	60	1	1.89	113
Private industry researchers	12	1	1.89	23
Total				227

Dated: June 15, 2001.

Chuck Gollmar,

Acting Associate Director for Policy, Planning and Evaluation, Centers for Disease Control and Prevention.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Program Announcement 01163]

HIV Prevention Projects for Community-Based Organizations Targeting Young Men of Color Who Have Sex With Men; Notice of Availability of Funds for Fiscal Year (FY) 2001

A. Purpose

For fiscal year 2001, the Centers for Disease Control and Prevention (CDC) is offering funds for a cooperative agreement program for Human Immunodeficiency Virus (HIV) Projects for Community-Based Organizations Targeting Young Men of Color Who Have Sex With Men (YMSM of Color). This program addresses the Healthy People 2010 priority area(s) of Educational and Community-Based Programs, HIV Infection, and Sexually Transmitted Diseases (STDs).

Note: CDC strongly suggests that you supplement this program announcement as it appears in the **Federal Register**, with a copy of the program announcement that is in an easy-to-use format. This easy-to-read version can be found on the CDC home page Internet address <http://www.cdc.gov>. Click on “Funding” then “Grants and Cooperative Agreements.”

B. Eligibility Requirements

1. Have proof of current tax-exempt status under Internal Revenue Service (IRS) Code Section 501(c)(3).
2. Be located and provide services in one of the following eligible metropolitan statistical areas (MSAs):

Atlanta, GA; Baltimore, MD; Chicago, IL; Cleveland—Lorain—Elyria, OH; Columbia, SC; Dallas, TX; Detroit, MI; Fort Lauderdale, FL; Houston, TX; Jackson, MS; Jacksonville, FL; Kansas City, MO—KS; Los Angeles, CA; Memphis, TN—AR—MS; Miami, FL; New Orleans, LA; New York, NY; Newark, NJ; Norfolk—Virginia Beach—Newport News, VA; Oakland, CA; Philadelphia, PA; St. Louis, MO; San Antonio, TX; San Diego, CA; San Francisco, CA; San Juan, PR; Seattle, WA; Tampa—St. Petersburg—Clearwater, FL; Orlando, FL; Washington, D.C.; West Palm Beach, FL.

3. Be able to show that your organization has provided HIV prevention or care services over the last two years to young men of color who have sex with men (YMSM of color) (ages 24 years and younger). This may include the sexual partners of YMSM and/or transgendered youth (ages 24 years and younger).

4. Be able to show that 75 percent of the persons your program served in the past two years are of racial/ethnic minority populations.

5. Provide at least three letters of support from civic, business or faith-based organizations, which are located in the community and also serve the proposed target population, that show you have been providing HIV prevention services to YMSM of color in the target communities.

6. Provide a statement that within 6 months of being selected for funding you will agree to:

- a. have at least one young person, age 24 years or younger, who is a member of the target population, actively serving on the board of directors, or
 - b. have a group of young persons from the targeted population actively involved in advising the board of directors on the direction of youth prevention programs. Please indicate if your organization already meets this requirement.
7. Not request more than \$350,000, including indirect costs, if applying

under Category A; and no more than \$500,000 if applying under Category B.

8. Not be a government or municipal agency (including a health department, school board, or public hospital), a private or public university or college, or a private hospital.

9. You can only apply for funding under one of the two categories (see next section).

Note: You are not eligible to receive Federal funds constituting an award, grant, cooperative agreement, contract, loan or any other form, if under Title 2 of the United States Code, Chapter 26, Section 1611, you are considered to be an organization as described in section 501(c)(4) of the Internal Revenue Code of 1986 that engages in lobbying activities.

C. Availability of Funds

About \$7 million is available for awards for fiscal year 2001. It is expected that those CBOs who are selected will receive funding in September 2001. The funds are to be used during a budget time frame of 12 months within a project period of up to 5 years.

Note: Funding estimates may change based on the availability of funds.

Funds will be distributed in two categories:

Category A: Delivery of HIV Prevention Services and Infrastructure Development. Approximately \$5 million is available to fund 14 to 16 awards in this category. Applications that ask for more than \$350,000, including indirect costs, will not be considered and the application will be returned to you.

Category B: Strategic Alliances for the Delivery of HIV Prevention Services. Approximately \$2 million is available to fund up to 4 awards under this category. Applications that ask for more than \$500,000, including indirect costs, will not be considered and the application will be returned to you.

Your organization’s project may be continued for a total of 5 years (that is to say, 2001, 2002, 2003, 2004, 2005) under this agreement. Funding at the same level after the first year is based on