

shipments and emphasize the use of electronic commerce. This chapter is available for review at [www.gsa.gov/transportationpolicy](http://www.gsa.gov/transportationpolicy). A paper copy may be obtained by contacting Elizabeth Allison on 202-219-1729 or [elizabeth.allison@gsa.gov](mailto:elizabeth.allison@gsa.gov).

**DATES:** Comments should be received by August 30, 2002.

**ADDRESSES:** Written comments may be addressed to Elizabeth Allison, Office of Governmentwide Policy (MTL), General Services Administration, 1800 F Street, NW., Room 1221, Washington, DC 20405. Send e-mail comments to: [elizabeth.allison@gsa.gov](mailto:elizabeth.allison@gsa.gov).

**FOR FURTHER INFORMATION CONTACT:** Elizabeth Allison, Program Analyst, Transportation Management Policy Program, Office of Governmentwide Policy, General Services Administration, at 202-219-1729 or Internet e-mail at [elizabeth.allison@gsa.gov](mailto:elizabeth.allison@gsa.gov).

**SUPPLEMENTARY INFORMATION:**

**Background**

The General Services Administration (GSA) published Federal Management Regulation (FMR) part 102-117 (41 CFR part 102-117), Transportation Management, at 65 FR 60059, October 6, 2000, and FMR part 102-118 (41 CFR part 102-118), Transportation Payment and Audit, at 65 FR 24568, April 26, 2000. The final rules included the retirement of the Optional Forms 1103 and 1203, the Government Bill of Lading (GBL) for domestic use and encouraged the use of electronic commerce.

For nearly 100 years, the Government Bill of Lading (GBL) was the primary document used to acquire transportation or transportation services in the Government. The mechanics of business transactions without a GBL must be fully understood to ensure a smooth transition to standard business practices; to move toward electronic commerce; to ensure transportation bills are auditable in the future and continue to protect the Government interest.

The purpose of this chapter is to provide information, promote industry understanding and heighten the knowledge base of the Government transportation manager. The chapter will assist the managers in fulfilling their roles and responsibilities related to the transportation management program and provide instructive information to complement the Federal Management Regulation (FMR) parts 102-117 and 102-118 (41 CFR parts 102-117 and 102-118). This chapter does not include directives or procedures that are specific to the mission of an agency.

**A. Request for Comments**

The General Services Administration (GSA) is seeking comments on this handbook chapter that covers the process of acquiring transportation. Comments will not be accepted on the underlying regulations. Transportation service providers and other interested parties are urged to participate by returning comments. Federal agencies are asked to help solidify the roles and responsibilities of the transportation manager and the transportation service provider moving Government freight and household goods.

Dated: August 12, 2002.

**Ted J. Bembenek, Jr.,**

*Director, Transportation Management Policy Division (MTL).*

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**BILLING CODE 6820-23-P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

[Program Announcement 02079]

**Alaska Anemia Intervention and Treatment Program; Notice of Award of Funds**

**A. Purpose**

The Centers for Disease Control and Prevention (CDC) announces the award of fiscal year (FY) 2002 funds for a grant program for Alaska Anemia Intervention and Treatment.

The purpose of the program is to reduce iron deficiency anemia rates of Alaska Native children in the Yukon-Kuskokwim Delta and Bristol Bay regions of Southwest Alaska, focusing on the potential relationship between *Helicobacter pylori* infection and iron deficiency anemia. This program addresses the "Healthy People 2010" focus areas Maternal, Infant, and Child Health and Immunization and Infectious Diseases.

**B. Eligible Applicants**

Assistance is provided only to the Alaska Department of Health and Social Services. No other applications were solicited. The House of Representatives Conference Report accompanying the Departments of Labor, Health and Human Services, and Education and Related Agencies Appropriation Bill ending September 30, 2002, and For Other Purposes (H.R. 3061, 107th Congress), recognized the unique qualifications of the Alaska Department of Health and Social Services for

carrying out the activities specified in this grant (H.R. Rep. 107-342).

**A. Funds**

Approximately \$494,494 is being awarded in FY 2002. It is expected that the award will begin on or about August 1, 2002, and will be made for a 12-month budget period within a one year project period.

**D. Where To Obtain Additional Information**

Business management technical assistance may be obtained from: Sharon Robertson, Grants Management Specialist, Procurement and Grants Office, Centers for Disease Control and Prevention, 2920 Brandywine Road, Room 3000, Atlanta, GA 30341-4146, Telephone number: 770-488-2748, Email address: [sqr2@cdc.gov](mailto:sqr2@cdc.gov).

For program technical assistance, contact: Michael Klatt, Associate Director for Management & Operations, Arctic Investigations Program, National Center For Infectious Diseases, Centers for Disease Control and Prevention, 4055 Tudor Centre Drive, Anchorage, AK 99508, Telephone number: 907-729-3406, Email address: [mlk2@cdc.gov](mailto:mlk2@cdc.gov).

Dated: August 8, 2002.

**Sandra R. Manning,**

*Director, Procurement and Grants Office, Centers for Disease Control and Prevention.*

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

[Program Announcement 02049]

**Johns Hopkins Center for Civilian Biodefense Strategies; Notice of Award of Funds**

**A. Purpose**

The Centers for Disease Control and Prevention (CDC) announces the award of fiscal year (FY) 2002 funds for a grant program for Johns Hopkins Center for Civilian Biodefense Strategies.

The purpose of the program is to continue support for the Johns Hopkins Center for Civilian Biodefense Strategies (JHCCBS) in development of national medical and public health policies and structures to protect the civilian population from bioterrorism. This program addresses the "Healthy People 2010" focus area Immunization and Infectious Diseases.

**B. Eligible Applicant**

Assistance is provided only to the JHCCBS. No other applications were solicited. The House of Representatives Conference Report accompanying the Departments of Labor, Health and Human Services, and Education and Related Agencies Appropriation Bill Ending September 30, 2002, and For Other Purposes (H.R. 3061, 107th Congress), recognized the Johns Hopkins Center for Civilian Biodefense Strategies unique qualifications for carrying out the activities specified in this grant (H.R. Rep. 107-342).

**C. Funds**

Approximately \$988,987 is being awarded in FY 2002. The award will begin on or about September 1, 2002, and will be made for a 12-month budget period within a project period of one year.

**D. Where To Obtain Additional Information**

Business management technical assistance may be obtained from: Sharon Robertson, Grants Management Specialist, Procurement and Grants Office, Centers for Disease Control and Prevention, 2920 Brandywine Road, Room 3000, Atlanta, GA 30341-4146, Telephone number 770-488-2748, e-mail address [sqr2@cdc.gov](mailto:sqr2@cdc.gov).

For program technical assistance, contact: Cyndi Shaffer, Bioterrorism Preparedness and Response, Centers for Disease Control and Prevention, 1600 Clifton Road, Atlanta, GA 30333, Telephone number 404-639-0131, e-mail address [csw3@cdc.gov](mailto:csw3@cdc.gov).

Dated: August 6, 2002.

**Sandra R. Manning,**

*Director, Procurement and Grants Office,  
Centers for Disease Control and Prevention.*  
[FR Doc. 02-20810 Filed 8-15-02; 8:45 am]

BILLING CODE 4163-18-P

**DEPARTMENT OF HEALTH AND HUMAN SERVICES****Centers for Disease Control and Prevention**

[Program Announcement 02204]

**University of Louisville Center for Deterrence of Biowarfare and Bioterrorism; Notice of Award of Funds****A. Purpose**

The Centers for Disease Control and Prevention (CDC) announces the award of fiscal year (FY) 2002 funds for a cooperative agreement program for the University of Louisville (UoL), Center

for Deterrence of Biowarfare and Bioterrorism (CDBB).

The purpose of the program is to develop communication and epidemiological capabilities that will facilitate detection and response to bioterrorism in protection of public health, provide effective education for health care providers in defense against bioterrorism, and conduct research to deter bioterrorism through enhanced medical and public health response capabilities. This program addresses the "Healthy People 2010" focus areas of Public Health Infrastructure and eliminating health disparities.

**B. Eligible Applicant**

Assistance is provided only to the University of Louisville, Center for Deterrence of Biowarfare and Bioterrorism. No other applications were solicited. The House of Representatives Conference Report accompanying the Departments of Labor, Health, and Human Services, and Education and Related Agencies Appropriation Bill ending September 30, 2002, and For Other Purposes (H.R. 3061, 107th Congress), recognized the University of Louisville's unique qualifications for carrying out the activities specified in this grant (H.R. Rep. 107-342).

**C. Funds**

Approximately \$1,483,481 is being awarded in FY 2002. It is expected that the award will begin on or about August 1, 2002 and will be made for a 12-month budget period.

**D. Where To Obtain Additional Information**

To obtain business management technical assistance, contact: Sharon H. Robertson, Grants Management Specialist, Procurement and Grants Office, Centers for Disease Control and Prevention, 2920 Brandywine Rd, Room 3000, Mailstop K-75, Atlanta, GA 30341-4146, Email address: [sqr2@cdc.gov](mailto:sqr2@cdc.gov).

For program technical assistance, contact: Gail Williams, MPH, CHES, Public Health Practice Program Office, Centers for Disease Control and Prevention, 4770 Buford Hwy. NE, Mailstop K-38, Atlanta, GA 30341-3717, Telephone number: 770-488-8166.

Dated: August 6, 2002.

**Sandra R. Manning,**

*Director, Procurement and Grants Office,  
Centers for Disease Control and Prevention.*  
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**DEPARTMENT OF HEALTH AND HUMAN SERVICES****Centers for Disease Control and Prevention**

[Program Announcement 02111]

**Fetal Alcohol Syndrome (FAS) Surveillance and Prevention Project in the Republic of South Africa (RSA); Notice of Award****A. Purpose**

The Centers for Disease Control and Prevention (CDC) announces the award of \$150,000 in fiscal year (FY) 2002 for a cooperative agreement program for Fetal Alcohol Syndrome (FAS) Surveillance and Prevention Project in the Republic of South Africa (RSA) with the Foundation for Alcohol Related Research (FARR) Project in collaboration with the National Health Laboratory Services (NHLS) and the University of Witwatersrand. The award is anticipated to begin in August 2002, with a 12-month budget period within a project period of up to three years.

The purpose of the program is to: (1) Develop an ongoing surveillance system for FAS; (2) estimate the prevalence of FAS in South African Provinces; (3) investigate and implement strategies for prevention; (4) complete needs assessments detailing the availability of and gaps in alcohol prevention and treatment services for women and intervention services for children; and (5) develop local epidemiology capacity through training of key study staff.

The Foundation for Alcohol Related Research (FARR) Project in collaboration with the National Health Laboratory Services (NHLS) and the University of Witwatersrand is the most appropriate and qualified agency to conduct activities under this Cooperative Agreement because:

1. FARR is the only organization in South Africa that can perform this activity. They are recognized by the South African National Department of Health as the only organization doing FAS epidemiologic research.

2. FARR was established in 1996 as a non-government (#97/00190/08) organization (NGO) whose mission is the prevention of FAS through surveillance, training, clinical diagnostic services, and epidemiological research.

3. The FARR leadership was the first to identify children with FAS in South Africa and bring international attention to the extent of the problem there.

4. FARR's goals and objectives are to prevent FAS through the exchange of information, enabling collaborative