

The notices are available for immediate inspection at the Federal Reserve Bank indicated. The notices also will be available for inspection at the office of the Board of Governors. Interested persons may express their views in writing to the Reserve Bank indicated for that notice or to the offices of the Board of Governors. Comments must be received not later than July 21, 2003.

A. Federal Reserve Bank of Chicago (Phillip Jackson, Applications Officer) 230 South LaSalle Street, Chicago, Illinois 60690-1414:

1. *Scott and Nancy Taylor*, Estherville, Iowa; to acquire additional voting shares of NorthStar Bancshares, Inc., Estherville, Iowa, and thereby indirectly acquire additional voting shares of NorthStar Bank, Estherville, Iowa,

B. Federal Reserve Bank of Minneapolis (Richard M. Todd, Vice President and Community Affairs Officer) 90 Hennepin Avenue, Minneapolis, Minnesota 55480-0291:

1. *Gary M. McKellips Revocable Trust*, *Gary McKellips trustee*, both of Alcester, South Dakota; and the *Debra K. McKellips Revocable Trust*, *Debra McKellips trustee*, both of Alcester, South Dakota; to retain voting shares of First State Banking Corp., Alcester, South Dakota, and thereby retain voting shares of State Bank of Alcester, Alcester, South Dakota.

Board of Governors of the Federal Reserve System, July 1, 2003.

Jennifer J. Johnson,
Secretary of the Board.

[FR Doc. 03-17141 Filed 7-7-03; 8:45 am]

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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 application 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/.

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 July 31, 2003.

A. Federal Reserve Bank of New York (Betsy Buttrill White, Senior Vice President) 33 Liberty Street, New York, New York 10045-0001:

1. *Lakeland Bancorp, Inc.*, Oak Ridge, New Jersey; to merge with CSB Financial, Teaneck, New Jersey, and thereby indirectly acquire Community State Bank, Teaneck, New Jersey.

Board of Governors of the Federal Reserve System, July 1, 2003.

Jennifer J. Johnson,
Secretary of the Board.

[FR Doc. 03-17140 Filed 7-7-03; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day-03-89]

Agency for Toxic Substances and Disease Registry; 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 at (404) 498-1210.

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 Seleda Perryman, 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: Support for State Oral Disease Prevention Program Infrastructure Development Evaluation Reporting—New—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

In 2000, the Surgeon General published the first ever report on oral health in America to alert Americans to the full meaning of oral health and its importance to general health and well-being. Included in the framework for action was the charge to build an effective oral health infrastructure that meets the oral health needs of all Americans and integrates oral health effectively into overall health planning. In response, the CDC will award funds for cooperative agreements to an estimated total of 13 demonstration sites in two phases, for the planning and implementation of oral health capacity infrastructure building and demonstration delivery programs. Building infrastructure enables the demonstration states to develop the capacity to achieve Healthy People 2010 objectives and reach many more Americans than a single local program could reach and to potentially sustain health gains beyond the funding cycle.

Infrastructure development encompasses many activities, each of which can be accomplished in a myriad of methods by the grantees. To summarize and track vital development information across grantee sites, a uniform reporting system must be established for the demonstration sites. Obtaining uniform data will allow the construction of summary reports to assist future sites and not-yet-funded oral health infrastructure development programs.

Evaluation tracking reporting for this project would describe the implementation of each site's infrastructure model in relation to environmental context and state characteristics. The results would provide evidence for the essential

implementation strategies for effective infrastructure development as defined by the consensus-based Association of State and Territorial Dental Directors (ASTDD) model. The results would be used to structure flexible guidelines for infrastructure development and identify high-priority activities enabling additional sites to efficiently plan and implement cost-effective oral health improvement activities. Additionally, this project will assist in the development of objectives and indicators of sustainability—the ability of these demonstration programs to

meet the needs of their constituents beyond the seed-funding period.

The objectives of the uniform evaluation tracking reporting system are to:

1. Evaluate infrastructure development activity characteristics among the funded sites.
2. Synthesize progress and promote cross-collaboration among grantees.
3. Make progress indicators available to nonfunded sites.
4. Promote positive infrastructure growth among funded and nonfunded sites.

The above objectives will be attained through a family of uniform evaluation reporting documents designed to evaluate demographic, extent, and culture climate of infrastructure development activities. One respondent from each site will be required to submit the activity-tracking document annually. Participation is mandatory for funded sites. Nonfunded sites actively involved in infrastructure development are welcome to submit tracking information to further provide information for all sites. Participation is not mandatory for nonfunded sites.

Respondents	Number of respondents per year	Number of responses per respondent	Avg. burden per response (in hrs.)	Total annual burden (in hrs.)
Demonstration site grantees	13	1	45/60	9.75

Dated: July 1, 2003.
Thomas A. Bartenfeld,
Acting Associate Director for Policy, Planning and Evaluation, Centers for Disease Control and Prevention.
 [FR Doc. 03-17171 Filed 7-7-03; 8:45 am]
BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Toxic Substances and Disease Registry

[Program Announcement 03078]

Program To Build Capacity To Conduct Site-Specific Environmental Health Education and Monitoring Activities; Notice of Intent To Fund Single Eligibility Award

A. Purpose

The Agency for Toxic Substances and Disease Registry (ATSDR) announces the intent to fund fiscal year (FY) 2003 funds for a cooperative agreement program to develop educational and environmental programs for communities surrounding the Tar Creek superfund site in Ottawa County, Oklahoma. The Catalog of Federal Domestic Assistance number for this program is 93.161.

B. Eligible Applicant

Assistance will be provided only to the State of Oklahoma Department of Health. The Oklahoma State Health Department was designated as the lead state Superfund Agency Protection agency. The Oklahoma State Department of Health has a long history of providing direct public health services and demonstrating the ability to

tract children with elevated blood levels in Ottawa County.

C. Funding

Approximately \$166,666 is available in FY 2003 to fund this award. It is expected that the award will begin on or before September 15, 2003, and will be made for a 12-month budget period within a project period of up to three years. Funding estimates may change.

D. Where to Obtain Additional Information

For general comments or questions about this announcement, contact: Technical Information Management, CDC Procurement and Grants Office, 2920 Brandywine Road, Atlanta, GA 30341-4146, Telephone: 770-488-2700.

For technical questions about this program, contact: Richard Sullivan, REHS, Agency for Toxic Substances and Disease Registry, 1600 Clifton Road, NE, MS E-33, Atlanta, GA 30333, Telephone: (404) 498-0521.

Dated: July 1, 2003.
Sandra R. Manning, CGFM,
Director, Procurement and Grants Office, Centers for Disease Control and Prevention.
 [FR Doc. 03-17159 Filed 7-7-03; 8:45 am]
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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Agency for Toxic Substances and Disease Registry

Public Meeting of the Inter-Tribal Council on Hanford Health Projects (ICHHP) in Association With the Citizens Advisory Committee on Public Health Service (PHS) Activities and Research at Department of Energy (DOE) Sites: Hanford Health Effects Subcommittee

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), the Agency for Toxic Substances and Disease Registry (ATSDR) and the Centers for Disease Control and Prevention (CDC) announce the following meeting.

Name: Public meeting of the Inter-tribal Council on Hanford Health Projects (ICHHP) in association with the Citizens Advisory Committee on PHS Activities and Research at DOE Sites: Hanford Health Effects Subcommittee (HHES).

Time And Date: 9:30 a.m.–4 p.m., August 6, 2003.

Place: Tamastslikt Cultural Institute, Umatilla Indian Reservation, 72779 Highway 331, Pendleton, Oregon 97801. Telephone: (541) 276-0355.

Status: Open to the public, limited only by the space available. The meeting room accommodates approximately 25 people.

Background: A Memorandum of Understanding (MOU) was signed in October 1990 and renewed in September 2000 between ATSDR and DOE. The MOU delineates the responsibilities and procedures for ATSDR's public health activities at DOE sites required under sections 104, 105, 107, and 120 of the Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA or "Superfund"). These activities include health consultations and public health assessments