

**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 Web site 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 October 17, 2003.

**A. Federal Reserve Bank of New York** (Jay Bernstein, Bank Supervision Officer) 33 Liberty Street, New York, New York 10045-0001:

1. *ESB Acquisition Corp.*, New York, New York; to become a bank holding company by acquiring 100 percent of the voting shares of Emigrant Bancorp, Inc., New York, New York, and thereby acquire Emigrant Savings Bank, New York, New York.

**B. Federal Reserve Bank of Cleveland** (Stephen J. Ong, Vice President) 1455 East Sixth Street, Cleveland, Ohio 44101-2566:

1. *The PNC Financial Services Group, Inc.*, Pittsburgh, Pennsylvania, and PNC Bancorp, Inc., Wilmington, Delaware; to merge with United National Bancorp, Bridgewater, New Jersey, and thereby indirectly acquire United Trust Bank, Bridgewater, New Jersey.

**C. Federal Reserve Bank of St. Louis** (Randall C. Sumner, Vice President) 411 Locust Street, St. Louis, Missouri 63166-2034:

1. *Convenant Financial Corporation*, Clarksdale, Mississippi; to become a bank holding company by acquiring 100 percent of the voting shares of Convenant Bank, Clarksdale, Mississippi.

Board of Governors of the Federal Reserve System, September 17, 2003.

**Robert deV. Frierson,**

*Deputy Secretary of the Board.*

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**BILLING CODE 6210-01-S**

**FEDERAL RESERVE SYSTEM****Notice of Proposals to Engage in Permissible Nonbanking Activities or to Acquire Companies that are Engaged in Permissible Nonbanking Activities**

The companies listed in this notice have given notice under section 4 of the Bank Holding Company Act (12 U.S.C. 1843) (BHC Act) and Regulation Y (12 CFR Part 225) to engage *de novo*, or to acquire or control voting securities or assets of a company, including the companies listed below, that engages either directly or through a subsidiary or other company, in a nonbanking activity that is listed in § 225.28 of Regulation Y (12 CFR 225.28) or that the Board has determined by Order to be closely related to banking and permissible for bank holding companies. Unless otherwise noted, these activities will be conducted throughout the United States.

Each notice is available for inspection at the Federal Reserve Bank indicated. The notice also will be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing on the question whether the proposal complies with the standards of section 4 of the BHC Act. Additional information on all bank holding companies may be obtained from the National Information Center Web site at [www.ffiec.gov/nic/](http://www.ffiec.gov/nic/).

Unless otherwise noted, comments regarding the applications must be received at the Reserve Bank indicated or the offices of the Board of Governors not later than October 17, 2003.

**A. Federal Reserve Bank of Cleveland** (Stephen J. Ong, Vice President) 1455 East Sixth Street, Cleveland, Ohio 44101-2566:

1. *Colonial Banc Corp.*, Eaton, Ohio; to engage *de novo* through its subsidiary, The Oculina Bank, Fort Pierce, Florida, and thereby operate a

savings association, pursuant to section 225.28(b)(4)(ii) of Regulation Y.

Board of Governors of the Federal Reserve System, September 17, 2003.

**Robert deV. Frierson,**

*Deputy Secretary of the Board.*

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

[60Day-03-116]

**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) 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:* 2003 Connecticut Partners Project: Health Plan Member Survey on Smoking Cessation—New—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

Tobacco use is a leading cause of death and disability in the United States. It is also a considerable expense for managed care organizations in the form of tobacco related disease. In Connecticut, the smoking prevalence is

22.8% and tobacco use results in \$1,273,000,000 in excess health care expenditures or \$389 per capita.

The Connecticut Partners Project will be developed by the Centers for Disease Control and Prevention (CDC), the American Association of Health Plans (AAHP), and four health plans in Connecticut. The four health plans are Anthem Blue Cross/Blue Shield, ConnectiCare, Health Net of the Northeast, Inc., and the Oxford Health Plan.

The objectives of the Project are as follows:

- Determine the feasibility of providing tobacco cessation counseling through case management programs within managed care.
- Assess the feasibility and costs of delivering cessation counseling in a local setting that allows evaluation.
- Determine whether counselor training through a standardized web based initiative impacts the quality of counseling.

- Evaluate the delivery and impact of the interventions as well as their cost.

The Project will provide an opportunity to assess the value and cost of providing tobacco cessation counseling through health plan case management strategies. At present there are only a handful of health plans that provide comprehensive tobacco control interventions. The proposed project will determine if there is a value to a smaller targeted approach with high-risk individuals. This could improve the reach of tobacco control efforts within managed care for a smaller, but important target population.

A major component of this project will be a survey of health plan members. The goal of the member survey will be to evaluate the success and relative effectiveness of the smoking cessation interventions implemented within each of the health plan's disease management programs. The survey will contain approximately 35 questions and will

include questions that assess patients' smoking status, readiness to quit, knowledge of adverse health effects of smoking, and use of smoking cessation resources. The survey will be sent to members identified as smokers in the commercial population within the health plans' disease management programs. The survey will be conducted on approximately 300 participants per health plan, for a total of 1,200 participants.

An independent evaluation vendor will be hired to field the survey. To achieve the highest possible response rate, the survey will be implemented in a mixed mode design, using both a self-administered mail survey followed by a telephone interview of non-respondents. Aggregated data will be reported to CDC and the health plans participating in the study. In addition, the reported results will be blinded as to the plans, but each plan will have access to its own data. There is no cost to respondents.

Respondents	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden (in hours)
Anthem .....	300	1	20/60	100
ConnectiCare .....	300	1	20/60	100
Health Net .....	300	1	20/60	100
Oxford .....	300	1	20/60	100
Total .....				400

Dated: September 15, 2003.

Nancy E. Cheal,

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

[FR Doc. 03-24076 Filed 9-18-03; 12:01 pm]

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Substance Abuse and Mental Health Services Administration**

**Agency Information Collection Activities: Proposed Collection; Comment Request**

In compliance with section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 concerning opportunity for public comment on proposed collections of information, the Substance Abuse and Mental Health Services Administration will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the information collection plans, call the SAMHSA Reports Clearance Officer on (301) 443-7978.

Comments are invited on: (a) Whether the proposed collections of information are 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.

*Proposed Project:* National Community Anti-Drug Coalition Institute Annual Coalition Survey and Database—New—The Substance Abuse and Mental Health Services Administration's (SAMHSA) Center for Substance Abuse Prevention has established the National Community Anti-Drug Coalition Institute through a grant to the Community Anti-Drug Coalitions of America (CADCA). The purpose of the Annual Coalition Survey and Database project is to collect and report on data which identify and describe the types of community

coalitions across our nation, and the activities in which they are involved. This information will help SAMHSA encourage and assist in the development of effective community coalitions and strategies designed to prevent illicit drug and underage alcohol and tobacco use. These data will also permit SAMHSA to address its responsibilities and measure performance as delineated in the HP2010 objective 26-23: to increase the number of communities using partnerships or coalition models to conduct comprehensive substance abuse prevention efforts.

To track progress in achieving this objective, SAMHSA will use these data to develop a national inventory of anti-drug coalitions and partnerships that can be updated annually in order to determine the number of community anti-drug coalitions in operation. Based on the coalition literature and input from the field, the inventory will include information on important characteristics, such as operational status, organizational type, target population served, funding sources, geographic location, and major community sector involvement, including faith, business, school,