

1. *Hometown Bancshares, Inc.*, Hamilton, Alabama; to become a bank holding company by acquiring 100 percent of the voting shares of PeoplesTrust Bank (in organization) Hamilton, Alabama.

Board of Governors of the Federal Reserve System, December 30, 2003.

**Margaret McCloskey Shanks**,

*Assistant Secretary of the Board.*

[FR Doc. 04-103 Filed 1-2-04; 8:45 am]

BILLING CODE 6210-01-S

**GENERAL SERVICES ADMINISTRATION**

**Federal Travel Regulation; Publication of Electronic Copy**

**AGENCY:** Office of Governmentwide Policy, General Services Administration (GSA).

**ACTION:** Notice.

**SUMMARY:** GSA announces publication of an improved electronic Federal Travel Regulation (FTR), and the discontinuance of the hard copy FTR looseleaf edition.

**FOR FURTHER INFORMATION CONTACT:** Jane Groat, Travel Management Policy Division, Office of Transportation and Personal Property, General Services Administration, Washington, DC 20405, (202) 501-4318, *jane.groat@gsa.gov*.

**SUPPLEMENTARY INFORMATION:** The FTR is the regulation contained in 41 Code of Federal Regulations (CFR), Chapters 300 through 304, which implements statutory requirements and Executive branch policies for travel by Federal civilian employees and others authorized to travel at Government expense.

GSA's goal is to publish the improved electronic FTR within the next 30 days. This edition contains a new look in appearance only and does not include new policy changes. Discontinuance of the hard copy FTR looseleaf edition is expected to follow in the near future after coordination with the Government Printing Office and Federal printing and publication officials.

Dated: December 24, 2003.

**Peggy DeProspero**,

*Director, Travel Management Policy Division.*

[FR Doc. 04-63 Filed 1-2-04; 8:45 am]

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

[60Day-04-21]

**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) 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-E11, Atlanta, GA 30333. Written comments should be received within 60 days of this notice.

*Proposed Project:* Child Stress and Toxics—New—The Agency for Toxic Substances and Disease Registry (ATSDR). ATSDR is mandated pursuant to the 1980 Comprehensive Environmental Response, Compensation, and Liability Act (CERCLA) and its 1986 amendments, the Superfund Amendments and Reauthorization Act (SARA), to serve the public by using the best science, taking responsive public health actions, and providing trusted health information to prevent harmful exposures and disease related to toxic substances.

For the past 6 years, ATSDR has worked with the U.S. Environmental Protection Agency (EPA), the Substance Abuse and Mental Health Services Administration (SAMSHA), state health departments, and local communities on the issue of psychosocial stress due to the presence of toxic hazards. A significant amount of research has focused on adult psychosocial stress in communities affected by hazardous substances. Comparatively little is known about levels of psychosocial stress among children or other susceptible populations in these settings. There is a critical need to develop a research instrument to screen children who live in communities at or near hazardous waste sites for elevated stress levels. The instrument will facilitate the establishment of group norms for levels of stress in children and is not intended to provide clinical or diagnostic information on individual children.

The purposes of this project are to: (1) Develop and pilot-test a scale to assess levels and sources of psychosocial stress in children who live in communities at or near hazardous waste sites; (2) modify the scale based on pilot-test results; (3) validate the scale on children living in communities near hazardous waste sites; and 4) provide an evidence base for planning and conducting interventions in affected communities.

CDC will pilot test the scale in at least 100 children in two age groups (5th and 9th grade levels) at one or more test sites. Semi-structured interviews or focus groups will be conducted to determine whether additional variables need to be included in the scale. During the second and third years of the project, a scale will be used to screen up to 4,700 children in communities at or near hazardous waste sites. CDC plans to then use this data to create effective interventions methods to predict and explain levels of stress in children living around hazardous waste sites. There are no costs to respondents.

Respondents	Number of respondents	Number of responses/respondent	Average burden/response (in hours)	Total burden (in hours)
Children 10-17 years old .....	5,000	1	30/60	2,500
Total .....	.....	.....	.....	2,500

Dated: December 29, 2003.

**Ron Ergle,**

*Acting Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.*

[FR Doc. 04-40 Filed 1-2-04; 8:45 am]

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

[60Day-04-20]

**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) 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-E11, Atlanta, GA 30333. Written comments should be received within 60 days of this notice.

Proposed Project: National Hospital Ambulatory Medical Care Survey (NHAMCS) 2005-2006 (OMB No. 0920-0278)—Extension—National Center for Health Statistics (NCHS), Centers for Disease Control and Prevention (CDC).

The National Hospital Ambulatory Medical Care Survey (NHAMCS) is managed by CDC, NCHS, Division of Health Care Statistics. This survey has been conducted annually since 1992. The purpose of NHAMCS is to meet the needs and demands for statistical information about the provision of ambulatory medical care services in the United States. Ambulatory services are rendered in a wide variety of settings, including physicians' offices and hospital outpatient and emergency departments. The targeted population for NHAMCS will consist of in-person visits made to outpatient departments and emergency departments that are non-Federal, short-stay hospitals (hospitals with an average length of stay

of less than 30 days) or those whose specialty is general (medical or surgical) or children's general. NHAMCS was initiated to complement the National Ambulatory Medical Care Survey (NAMCS, OMB No. 0920-0234) which provides similar data concerning patient visits to physicians' offices.

NHAMCS provides a range of baseline data on the characteristics of the users and providers of ambulatory medical care. Data collected include patients' demographic characteristics and reason(s) for visit, and the physicians' diagnosis, diagnostic services, medications, and disposition. In addition to the annual statistics normally collected, a key focus of the 2005/06 survey will be on the prevention and treatment of selected chronic conditions. These data, together with trend data, may be used to monitor the effects of change in the health care system, for the planning of health services, improving medical education, and assessing the health status of the population.

Users of NHAMCS data include, but are not limited to, congressional offices, Federal agencies, state and local governments, schools of public health, researchers, administrators, and health planners. Data collection will continue through 2005 to 2006. The number of respondents for the NHAMCS is based on an annual sample of approximately 500 hospitals with an 88 percent participation rate. There are no costs to respondents.

Respondents	Number of respondents	Number of responses/respondent	Avg. burden/response (in hrs)	Total burden hours
Induction forms:				
Hospital (Ineligible) .....	50	1	15/60	13
Hospital (Eligible) .....	440	1	1	440
Emergency Departments .....	400	1	1	400
Outpatient Departments .....	240	4	1	960
Patient record forms:				
Emergency Departments .....	400	100	5/60	3,333
Outpatient Departments .....	240	150	5/60	3,000
<b>Total .....</b>				<b>8,146</b>

Dated: December 29, 2003.

**Ron Ergle,**

*Acting Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.*

[FR Doc. 04-41 Filed 1-2-04; 8:45 am]

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Centers for Disease Control and Prevention**

**Advisory Committee on Childhood Lead Poisoning Prevention**

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), the National Center for Environmental Health (NCEH) of the Centers for Disease Control and

Prevention (CDC) announces the following committee meeting.

*Name:* Advisory Committee on Childhood Lead Poisoning Prevention (ACCLPP).

*Times and Dates:* 8:30 a.m.-5 p.m., March 9, 2004. 8:30 a.m.-12:30 p.m., March 10, 2004.

*Place:* Admiral Fell Inn, 888 South Broadway, Baltimore, Maryland 21231. Telephone: 410/522-7377 or toll free 866/583-4162.

*Status:* Open to the public, limited only by the space available. The meeting room accommodates approximately 75 people.