

Providing advice in connection with financing transactions and similar transactions and conducting financial feasibility studies in accordance with Section 225.28(b)(6)(iii);

Providing securities brokerage services in accordance with Section 225.28(b)(7)(i);

Acting as riskless principal in securities transactions in accordance with Section 225.28(b)(7)(ii);

Acting as agent in the provision of private placement services in accordance with Section 225.28(b)(7)(iii); and

Providing to customers as agent transactional services with respect to swaps and similar transactions in accordance with Section 225.28(b)(7)(v).

Board of Governors of the Federal Reserve System, June 17, 2004.

Robert deV. Frierson,

Deputy Secretary of the Board.

[FR Doc.04-14105 Filed 6-21-04; 8:45 am]

BILLING CODE 6210-01-S

GENERAL SERVICES ADMINISTRATION

Office of Governmentwide Policy

Governmentwide Relocation Advisory Board

AGENCY: Office of Governmentwide Policy, GSA.

ACTION: Notice.

SUMMARY: The General Services Administration is announcing the creation of a Governmentwide Relocation Advisory Board (the Board). The Board will offer advice and recommendations on a wide range of relocation management issues. The Board's first priority will be to review the current policies promulgated through the Federal Travel Regulation (FTR) for relocation allowances and associated reimbursements. Board meetings will be announced in the **Federal Register**.

FOR FURTHER INFORMATION CONTACT: Joan Bender, Room 1221, GSA Building, Washington, DC 20405, (202) 208-4462, or by email at joan.bender@gsa.gov.

SUPPLEMENTARY INFORMATION: This notice is published in accordance with the provisions of the Federal Advisory Committee Act (Pub. L. 92-463), and advises of the establishment of the GSA Governmentwide Relocation Advisory Board. The Administrator of General Services has determined that the establishment of the Board is necessary and in the public interest.

The Charter for the Governmentwide Relocation Advisory Board reads as follows:

General Services Administration (GSA)

Governmentwide Relocation Advisory Board

CHARTER

Official Designation:
Governmentwide Relocation Advisory Board.

Scope and Objectives: The Board will review the current policies promulgated through the Federal Travel Regulation (FTR) for relocation and associated reimbursements and allowances for Federal relocating employees. Through the review, the Board will recommend improvements for better management of Governmentwide relocation.

Duration: The Board will exist for 12 months from the date of the Charter unless renewed prior to official termination date.

Reporting Relationship: The Board reports to General Services Administration's (GSA's) Deputy Associate Administrator, Office of Transportation and Personal Property.

Support: GSA's Office of Governmentwide Policy, Office of Transportation and Personal Property will provide staff and other support to the Board.

Duties: The Board will provide advice and recommendations only.

Costs: Estimated cost of supporting the Board's functions is \$83,820, including direct and indirect expenses. FTE estimate to support the Board is 1.5.

Meetings: The Board is anticipated to meet at least 7 times during the 12-month period.

Organization: With the approval of GSA, the Board may create such subcommittees as may be necessary to fulfill its mission. In addition, GSA and the Board may establish any operating procedures required to support the group, consistent with the Federal Advisory Committee Act, as amended.

Date of Termination: The Board will terminate 12 months from the date of Charter filing unless formally renewed prior to official termination date.

Approved: Stephen A. Perry
(Administrator) June 14, 2004.

Dated: June 14, 2004.

Becky Rhodes,

Deputy Associate Administrator.

[FR Doc. 04-14088 Filed 6-21-04; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration on Aging

Notice of Establishment of Policy Committee for the 2005 White House Conference on Aging

AGENCY: Administration on Aging, HHS.

ACTION: Notice of establishment of the Policy Committee for the 2005 White House Conference on Aging.

SUMMARY: Pursuant to Section 10(a) of the Federal Advisory Committee Act as amended (5 U.S.C. appendix 2), notice is hereby given that the Charter establishing the Policy Committee for the 2005 White House Conference on Aging has been completed and signed by Health and Human Services Secretary Tommy Thompson on June 15, 2004.

FOR FURTHER INFORMATION CONTACT:

Mame Templeton, White House Conference on Aging, Administration on Aging, Department of Health and Human Services, Washington, DC 20201, 202-357-3514, Mame.Templeton@aoa.hhs.gov.

Any interested person may file written comments with the Policy Committee by forwarding the statement to the contact person listed on this notice. The statement should include the name, address, telephone number, email address, and when applicable, the business or professional affiliation of the interested person.

SUPPLEMENTARY INFORMATION:

I. Background and Authority

Pursuant to the Older Americans Act Amendments of 2000 (Pub. L. 106-501, November 2000), the President will convene a White House Conference on Aging no later than December 31, 2005, to develop recommendations for additional research and action in the field of aging. The Secretary of Health and Human Services is responsible for planning and conducting the Conference in cooperation with the Assistant Secretary for Aging, the Director of the National Institute on Aging, the Administrator of the Centers for Medicare and Medicaid Services, the Commissioner of Social Security, and the heads of such other Federal departments and agencies as are appropriate.

II. Structure

According to the Older Americans Act Amendments of 2000 (Pub. L. 106-501, November 2000), the Policy Committee is composed of 17 members, including the Chairman, who was selected by the

President from among the members of the Committee. The 17 members were appointed as follows:

(A) Presidential Appointees—Nine members were selected by the President and include three members who are officers or employees of the United States and six members with experience in the field of aging, including providers and consumers of aging services.

(B) House Appointees—Two members were selected by the Speaker of the House of Representatives, after consultation with the Committee on Education and the Workforce and the Committee on Ways and Means of the House of Representatives; and two members were selected by the Minority Leader of the House of Representatives, after consultation with such committees.

(C) Senate Appointees—Two members were selected by the Majority Leader of the Senate, after consultation with members of the Committee on Health, Education, Labor and Pensions and the Special Committee on Aging of the Senate; and two members were selected by the Minority Leader of the Senate, after consultation with members of such committees.

Support services will be provided by the Office of the Executive Director of the White House Conference on Aging. The Secretary may establish such other committees, including technical committees, as may be necessary to assist in the planning, conducting, and reviewing of the Conference. The Committee will notify the Department Committee Management Officer upon establishing any subcommittees and provide all required information, including name, membership, and functions of any such subcommittee(s) and estimated frequency of meetings. Any subcommittee will be composed exclusively of Committee members. The Committee Chairperson will appoint the chairperson of any subcommittee. Any subcommittee will comply with the applicable requirements of the Federal Advisory Committee Act.

III. Compensation

Appointed members of any such committee (other than any officers or employees of the Federal Government), while attending conferences or meetings of the committee or otherwise serving at the request of the Secretary, shall be entitled to receive compensation at a rate to be fixed by the Secretary, but not to exceed the daily equivalent of the maximum rate of pay payable under section 5376 of title 5, United States Code (including travel time). While away from their homes or regular places of business, such members may be

allowed travel expenses, including per diem in lieu of subsistence, as authorized under section 5703 of such title for persons employed intermittently in Federal Government service.

Dated: June 15, 2004.

Ann Y. McGee,

Executive Director, White House Conference on Aging.

[FR Doc. 04-14034 Filed 6-21-04; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Developing and Implementing the Institute for Quality in Laboratory Medicine

Announcement Type: New.

Funding Opportunity Number: 04151.

Catalog of Federal Domestic

Assistance Number: The Catalog of Federal Domestic Assistance number is 93.064.

Key Dates:

Letter of Intent Deadline: July 7, 2004.

Application Deadline: July 22, 2004.

I. Funding Opportunity Description

Authority: This program is authorized under section 317 (k)(2) of the Public Health Service Act, 42 U.S.C. section 247b (k)(2), as amended.

Purpose: The purpose of the program is to develop and implement a series of activities associated with the development of an Institute of Quality in Laboratory Medicine. These activities aim to improve the effectiveness of laboratory testing services while, at the same time, enhancing the quality of laboratory testing services in the United States. These enhancements in testing practices and the quality of laboratory testing services will be related to areas of public health significance such as, for example, detection and prevention of cancer, more timely assessment of human health, testing for genetic conditions, and other diseases of importance to the public's health, and the regulations, *i.e.*, Clinical Laboratory Improvement Amendments of 1988 (CLIA-88) governing laboratory testing.

Measurable outcomes of the program will be in alignment with the following performance goal for the Public Health Practice Program Office (PHPO): "Assure the public health infrastructure at the Federal, state, and local levels has the capacity to provide essential public health services to the citizens of the nation to respond to bioterrorism, other

infectious disease outbreaks, other public health threats, emergencies and prepare frontline state and local health departments and laboratories to respond to current and emerging public health threats."

This program addresses the "Healthy People 2010" focus area(s): "Access to Quality Health Services" and "Public Health Infrastructure".

Activities

Awardee activities, in collaboration with the CDC and its partners in the Quality Institute Conference, are as follows:

a. Develop plans to establish and evaluate a core set of measures for the quality of laboratory services and assess the feasibility of using this core set of indicators in a variety of laboratory settings.

b. Develop plans for implementing sentinel networks to enhance the value of laboratory practices and evaluate changes in practice over time; including alternative approaches to identified barriers (eg: regulatory barriers)

c. Provide a plan for creating a national report on the quality of laboratory services including strategies that can be used to improve quality assurance activities, recognition of where most testing errors may be occurring, and issues related to near patient testing. The report may include such items as information on the electronic health record, the expanded role of the electronic health record, database interoperability, evidenced based practice, the changing laboratory quality assurance paradigm (pre-analytic, analytic, and post-analytic), models to integrate evidence, optimizing time from research evaluation of a diagnostic test to its clinical utility, current challenges, and long-term challenges. The plan would include suggested partners to provide data for the report, mechanisms to maintain the report as a virtual document, and an outline of the proposed report's content.

d. Manage a process to incorporate and implement an Institute for Quality in Laboratory Medicine, including the logistics of the formation, legal documents, and structure of institute.

e. Lead efforts to improve laboratory quality systems in resource limited laboratories through:

i. Developing, promoting, and distributing laboratory health systems consensus standards, guidelines, and reports that target the needs of resource limited laboratories.

ii. Providing education, training, and mentoring opportunities in quality systems for leaders and quality