

SUPPLEMENTARY INFORMATION:**A. Purpose**

The General Services Administration will be requesting that the Office of Management and Budget (OMB) review and approve information collection, 3090-0121, concerning industrial funding fee and sales reporting. The information is used primarily by contracting officers to estimate requirements for the subsequent year, evaluate the effectiveness of a schedule, negotiate better prices based on volume and for special reports.

B. Annual Reporting Burden

Respondents: 15,710
Responses Per Respondent: 20
Total Responses: 314,200
Hours Per Response: .0833
Total Burden Hours: 26,173
OBTAINING COPIES OF

PROPOSALS: Requesters may obtain a copy of the information collection documents from the General Services Administration, Regulatory Secretariat (VR), 1800 F Street, NW., Room 4035, Washington, DC 20405, telephone (202) 208-7312. Please cite OMB Control No. 3090-0121, Industrial Funding Fee and Sales Reporting, in all correspondence.

Dated: July 26, 2004

RALPH DESTEFANO

(Acting) Director, Contract Policy Division
 [FR Doc. 04-17454 Filed 7-30-04; 8:45 am]
BILLING CODE 6820-61-S

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

[Program Announcement 04276]

Expansion of HIV/AIDS Surveillance, Monitoring and Evaluation, and Information Management Activities in the Republic of Honduras; Notice of Intent To Fund Single Eligibility Award**A. Purpose**

The Centers for Disease Control and Prevention (CDC) announces the intent to fund fiscal year (FY) 2004 funds for a cooperative agreement program to increase the capacity, quality and coverage of HIV/AIDS-related Strategic Information activities undertaken by the Ministry of Health (MOH) as cornerstone components of an expanded national response to HIV/AIDS targeting highly vulnerable populations (HVPs) in the Republic of Honduras. In the context of Honduras, HVPs include prostitutes, men who have sex with men (MSM), persons living with HIV/AIDS

(PLWHAs), prisoners, and members of the Garifuna and other ethnic groups. Strategic Information is defined as: programs and activities supporting the implementation of first and second generation epidemiological surveillance survey activities; systems for monitoring and evaluation of the impact of the multi-sectoral national response to HIV/AIDS; and strategic initiatives to improve infrastructure and systems supporting surveillance, prevention, care and treatment, laboratory and information management activities.

The Catalog of Federal Domestic Assistance number for this program is 93.941.

B. Eligible Applicant

Assistance will be provided only to the Ministry of Health (MOH) of the Republic of Honduras.

The Honduras MOH is charged by national law to oversee the national response to health problems that threaten the well being of the country's citizens, including HIV/AIDS. The MOH, as the entity responsible for public health in Honduras, has direct responsibility for overseeing surveillance and the monitoring and evaluation of the national response to HIV/AIDS and HIV-related conditions in the country. The MOH of Honduras has collaborated with HHS/CDC and USAID in the past, including collaborations related to the evaluation of surveillance and laboratory systems related to HIV/AIDS in 1999-2000.

C. Funding

Approximately \$300,000 is available in FY 2004 to fund this award. It is expected that the award will begin on or before September 1, 2004, and will be made for a 12-month budget period within a project period of up to 3 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: Edgar Monterroso/Mark Fussell, Co-Project Officers, HHS/CDC AE Guatemala Unit 3321, APO AA 34024, Telephone: (502) 369-0791, Ext 515, E-mail: em2z@cdc.gov or mfzz@cdc.gov.

Dated: July 27, 2004.

William P. Nichols, MPA,

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

[FR Doc. 04-17483 Filed 7-30-04; 8:45 am]

BILLING CODE 4163-18-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES**Administration for Children and Families****Agency Recordkeeping/Reporting Requirements Under Emergency Review by the Office of Management and Budget (OMB)**

Title: Fourth National Incidence Study of Child Abuse and Neglect (NIS-4).

OMB No.: New Request.

Description: The Department of Health and Human Services intends to issue letters to recruit agencies for participation in the next National Incidence Study of Child Abuse and Neglect (NIS). This will be the fourth cycle of this periodic study. The NIS-1, mandated under Public Law (Pub. L.) 93-247 (1974), was conducted in 1979 and 1980 and reported in 1981. The NIS-2 was mandated under Pub. L. 98-457 (1984), conducted in 1986 and 1987, and reported in 1988. The NIS-3 was mandated under both the Child Abuse Prevention, Adoption and Family Services Act of 1988 (Pub. L. 100-294) and the Child Abuse, Domestic Violence, Adoption and Family Services Act of 1992 (Pub. L. 102-295), conducted between 1993 and 1995, and published in 1996. The NIS-4 is mandated by the Keeping Children and Families Safe Act of 2003 (Pub. L. 108-36).

The NIS is unique in that it goes beyond the abused and neglected children who come to the attention of the Child Protective Services (CPS) system. In contrast to the National Child Abuse and Neglect Data Systems (NCANDS), which rely solely on reported cases, the NIS design assumes that reported children represent only a portion of the children who actually are maltreated. Following the implications of its assumption, the NIS estimates the scope of the maltreated child population by combining information about reported cases with data on maltreated children identified by professionals (called "sentinels") who encountered them during the normal course of their work in a wide range of agencies in representative communities. These professionals are asked to remain on the lookout for children they believe are