

(NIB) and National Industries for the Severely Handicapped (NISH). The proposed transaction fee of 4% of the total transportation charges will be deducted from transportation service provider (TSP) invoices prior to payment via the GSA Transportation Management Services Solution (TMSS).

DATES: Please submit your comments by January 9, 2006.

ADDRESSES: Mail comments to General Services Administration, Federal Acquisition Service, Travel and Transportation Management Division (FBL), 1901 South Bell Street, Crystal Mall Building 4, Room 812, Arlington, VA 22202, Attention: Ms. Mary Anne Sykes (Re: **Federal Register** comments)

FOR FURTHER INFORMATION CONTACT: Ms. Mary Anne Sykes, Transportation Programs Branch, by telephone at 703 605-2889 or by e-mail at transportation.programs@gsa.gov.

SUPPLEMENTARY INFORMATION:

A. Background

Through fiscal year 1994, the GSA transportation program was funded by appropriation. For fiscal year 1995 and beyond, Congress determined that certain GSA functions including the transportation management function would no longer be funded by direct appropriation. GSA is now industrially funded and as a result must charge fees to fund its transportation programs. Accordingly, GSA is establishing a transaction fee to help fund TMSS and the transportation management support services related directly to EDC, WDC, and NIB/NISH transportation. GSA's comprehensive web-based TMSS will be used to process the transportation transactions. The use of TMSS will increase the efficiency and effectiveness of transportation billing, prepayment audit, and payment. TSPs that provide transportation services for GSA, Global Supply (FL) will benefit from TMSS electronic billing, automated prepayment audit, faster payments, online transaction tracking, automated reports, and a complete audit history trail. There will be no action required on the part of the TSP, the 4% transaction fee will automatically be calculated by TMSS and deducted from the invoice by the GSA Finance Office when the payment is processed.

B. Substantive Changes

The proposed transaction fee of 4% of the total FL transportation charges will be deducted from TSP invoices with rates effective May 1, 2006.

Note: Rate filing and program participation parameters will be

outlined in the FMP, Request for Offer provided to industry.

Dated: December 1, 2005.

Tauna T. Delmonico,

Director, Travel and Transportation Management Division (FBL), GSA.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Request for Nominations of Candidates To Serve on the Advisory Committee on Immunization Practices, Centers for Disease Control and Prevention, Department of Health and Human Services

The Centers for Disease Control and Prevention (CDC) is soliciting nominations for possible membership on the Advisory Committee on Immunization Practices (ACIP). This committee provides advice and guidance to the Secretary of the Department of Health and Human Services (HHS), and the Director, CDC, regarding the most appropriate application of antigens and related agents for effective communicable disease control in the civilian population. The committee reviews and reports regularly on immunization practices and recommends improvements in the national immunization efforts.

The committee also establishes, reviews, and as appropriate, revises the list of vaccines for administration to children eligible to receive vaccines through the Vaccines for Children (VFC) Program.

Nominations are being sought for individuals who have expertise and qualifications necessary to contribute to the accomplishments of the committee's objectives. Nominees will be selected based upon expertise in the field of immunization practices; multi-disciplinary expertise in public health; expertise in the use of vaccines and immunologic agents in both clinical and preventive medicine; knowledge of vaccine development, evaluation, and vaccine delivery; or knowledge about consumer perspectives and/or social and community aspects of immunization programs. Federal employees will not be considered for membership. Members may be invited to serve up to 4-year terms.

Consideration is given to representation from diverse geographic areas, both genders, ethnic and minority

groups, and the disabled. Nominees must be U.S. citizens.

The following information must be submitted for each candidate: Name, affiliation, address, telephone number, and a current curriculum vitae. E-mail addresses are requested if available.

Nominations should be sent in writing and postmarked by December 19, 2005 to: Demetria Gardner, National Immunization Program, Centers for Disease Control and Prevention, 1600 Clifton Road, NE., Mailstop E-61, Atlanta, Georgia 30333, telephone (404) 639-8836.

The Director, Management Analysis and Services Office, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities for both CDC and the Agency for Toxic Substances and Disease Registry.

Dated: December 5, 2005.

Diane Allen,

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

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[Document Identifier: CMS R-232, CMS 9042, CMS R-244 and CMS 10163]

Agency Information Collection Activities: Submission for OMB Review; Comment Request

AGENCY: Centers for Medicare & Medicaid Services.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Centers for Medicare & Medicaid Services (CMS), Department of Health and Human Services, is publishing the following summary of proposed collections for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the Agency's function; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to