

**CONSUMER PRODUCT SAFETY COMMISSION****Sunshine Act Meeting**

**TIME AND DATE:** Thursday, February 23, 2006; 10 a.m.

**PLACE:** Room 420, Bethesda Towers, 4330 East West Highway, Bethesda, Maryland.

**STATUS:** Open to the public.

**MATTERS TO BE CONSIDERED:**

Flammability Standard for Upholstered Furniture—The Commission staff will brief the Commission on regulatory options to address residential upholstered furniture flammability.

For a recorded message containing the latest agenda information, call (301) 504-7948.

**CONTACT PERSON FOR MORE INFORMATION:**

Todd A. Stevenson, Office of the Secretary, U.S. Consumer Product Safety Commission, 4330 East West Highway, Bethesda, MD 20814 (301) 504-7923.

Dated: February 9, 2006.

**Todd A. Stevenson,**

*Secretary.*

[FR Doc. 06-1372 Filed 2-9-06; 2:35 pm]

**BILLING CODE 6355-01-M**

**DEPARTMENT OF DEFENSE****Office of the Secretary**

[No. DoD-2006-HA-0015]

**Proposed Collection; Comment Request**

**AGENCY:** Office of the Assistant Secretary of Defense for Health Affairs, DoD.

**ACTION:** Notice.

In accordance with Seciton 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Office of the Assistant Secretary of Defense for Health Affairs announces the proposed extension of a currently approved collection and seeks public comment on the provisions thereof. Comments are invited on: (a) Whether the proposed extension of 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 information collection; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the information collection on respondents, including through the use of automated

collection techniques or other forms of information technology.

**DATES:** Consideration will be given to all comments received by April 14, 2006.

**ADDRESSES:** You may submit comments, identified by docket number and/or RIN number and title, by any of the following methods:

- Federal eRulemaking Portal: <http://www.regulations.gov>. Follow the instructions for submitting comments.
- Mail: Federal Docket Management System Office, 1160 Defense Pentagon, Washington, DC 20301-1160.

*Instructions:* All submissions received must include the agency name and docket number or Regulatory Information Number (RIN) for this **Federal Register** document. The general policy for comments and other submissions from members of the public is to make these submissions available for public viewing on the Internet at <http://regulations.gov> as they are received without change, including any personal identifiers or contact information.

**FOR FURTHER INFORMATION CONTACT:** To request more information on this proposed information collection, please write to TRICARE Management Activity—Aurora, Program Requirements Division, 16401 E. Centretech Parkway, ATTN: John Leininger, Aurora, CO 80011-9066 or call TRICARE Management Activity, Program Requirements Division at (303) 676-3613.

*Title Associated Form, and OMB Number:* CHAMPUS Claim Form—Patient's Request for Medical Payment; DD Form 2642; OMB Number 0720-0006.

*Needs and Uses:* This form is used solely by beneficiaries claiming reimbursement for medical expenses under the TRICARE Program. The information collected will be used by TRICARE/CHAMPUS to determine beneficiary eligibility, other health insurance liability, certification that the beneficiary received the care, and reimbursement for the medical services received.

*Affected Public:* Individual or households.

*Annual Burden Hours:* 600,000.

*Number of Respondents:* 2,400,000.

*Responses Per Respondent:* 1.

*Average Burden Per Response:* 15 minutes.

*Frequency:* On occasion.

**SUPPLEMENTARY INFORMATION:****Summary of Information Collection**

This collection instrument is for use by beneficiaries under the TRICARE Program. TRICARE/CHAMPUS is a

health benefits entitlement program for the dependents of active duty Uniform Services members and decreased sponsors, retirees and their dependents, dependents of Department of Homeland Security (Coast Guard) sponsors, and certain North Atlantic Treaty Organizations, National Oceanic and Atmospheric Administration, and Public Health Service eligible beneficiaries. DD Form 2642 is used solely by TRICARE/CHAMPUS beneficiaries to file for reimbursement of costs paid to provider and suppliers for authorized health care services or supplies.

Dated: January 30, 2006.

**Patricia L. Toppings,**

*Alternate OSD Federal Register Liaison Officer, Department of Defense.*

[FR Doc. 06-1268 Filed 2-10-06; 8:45 am]

**BILLING CODE 5001-06-M**

**DEPARTMENT OF DEFENSE****Office of the Secretary**

[No. DoD-2006-HA-0014]

**Proposed Collection; Comment Request**

**AGENCY:** Office of the Assistant Secretary of Defense for Health Affairs, DoD.

**ACTION:** Notice.

In compliance with Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Office of the Assistant Secretary of Defense for Health Affairs announces the extension of an existing public information collection and seeks public comment on the provisions thereof. 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 information collection; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the information collection on respondents, including through the use of automated collection techniques or other forms of information technology.

**DATES:** Consideration will be given to all comments received by April 14, 2006.

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