

Dated: July 18, 2007.  
**Robert Sargis,**  
*Reports Clearance Officer.*  
 [FR Doc. 07-3576 Filed 7-23-07; 8:45 am]  
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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

**Proposed Information Collection Activity; Comment Request**

**Proposed Projects**

*Title:* Administrative Subpoena.

*OMB No.:* 0970-0152.

*Description:* Section 452(a)(11) of the Social Security Act requires the Secretary of the Department of Health and Human Services to promulgate a form for administrative subpoenas to be used in State child support enforcement programs to collect information for use in the establishment, modification and enforcement of child support orders in interstate cases. Section 454(9)(E) of the Social Security Act requires each State to cooperate with any other State in using the Federal form for issuance of administrative subpoenas in interstate child support cases. Tribal IV-D agencies are not required to use this

form but may choose to do so. OMB approval of this form is expiring in January 2008 and the Administration for Children and Families is requesting an extension of this form.

*Respondents:* State, local or Tribal agencies administering a child support enforcement program under title IV-D of the Social Security Act.

**ANNUAL BURDEN ESTIMATES**

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Administrative Subpoena .....	19,508	1	.5	9,754

*Estimated Total Annual Burden Hours:* 9,754.

In compliance with the requirements of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Administration for Children and Families is soliciting public comment on the specific aspects of the information collection described above. Copies of the proposed collection of information can be obtained and comments may be forwarded by writing to the Administration for Children and Families, Office of Administration, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer. E-mail address: [infocollection@acf.hhs.gov](mailto:infocollection@acf.hhs.gov). All requests should be identified by the title of the information collection.

The Department specifically requests comments 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) 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. Consideration will be given to comments and suggestions submitted within 60 days of this publication.

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

**Proposed Information Collection Activity; Comment Request**

**Proposed Projects**

*Title:* Notice of Lien.

*OMB No.:* 0970-0153.

*Description:* Section 452(a)(11) of the Social Security Act requires the Secretary of Health and Human Services to promulgate a form for imposition of liens to be used by the State child support enforcement (Title IV-D) agencies in interstate cases. Section 454(9)(E) of the Social Security Act requires each State to cooperate with any other State in using the Federal form for imposition of liens in interstate child support cases. Tribal IV-D agencies are not required to use this form but may choose to do so. OMB approval of this form is expiring in January 2008 and the Administration for Children and Families is requesting an extension of this form.

*Respondents:* State, local or Tribal agencies administering a child support enforcement program under title IV-D of the Social Security Act.

**ANNUAL BURDEN ESTIMATES**

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Notice of Lien .....	123,637	1	.25	30,909

*Estimated Total Annual Burden Hours:* 30,909.

In compliance with the requirements of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the

Administration for Children and Families is soliciting public comment on the specific aspects of the

information collection described above. Copies of the proposed collection of information can be obtained and comments may be forwarded by writing to the Administration for Children and Families, Office of Administration, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer. E-mail address: [infocollection@acf.hhs.gov](mailto:infocollection@acf.hhs.gov). All requests should be identified by the title of the information collection.

The Department specifically requests comments 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) 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. Consideration will be given to comments and suggestions submitted within 60 days of this publication.

Dated: July 18, 2007.  
**Robert Sargis,**  
*Reports Clearance Officer.*  
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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

**Submission for OMB Review; Comment Request**

*Title:* Performance Progress Report (PPR).  
*OMB No.:* New Collection.  
*Description:* The PPR is a set of uniform reporting formats that will be used for standard reporting on performance under grants and cooperative agreements issued by the

Administration for Children and Families (ACF) and the Grants Center of Excellence (CoE) partners. Performance reporting is an integral part of the President's Management Agenda (PMA). In addition to allowing for uniformity of information collection, these formats will support systematic electronic collection and submission of information. These formats will provide interim and final performance progress information as required by OMB Circulars A-102 and A-110.

The PPR consists of a cover page and six optional forms or formats. The cover page contains identifying data elements and a section for a performance narrative. Use of the cover page is required, and programs may only require their respondents to submit this page and/or attach a performance narrative. Alternatively, programs may opt to require the cover page and one or more of the six optional formats.

*Respondents:* ACF, the Grants Center of Excellence partners and their grantees.

**ANNUAL BURDEN ESTIMATES**

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Performance Progress Report (SF-PPR) .....	16,864	1	.416666	7,027
Cover Page Continuation (SF-PPR-2) .....	6,540	1	.333333	2,180
Performance Measures (SF-PPR-A) .....	755	1	.75	566
Program Indicators (SF-PPR-B) .....	3,075	1	.166666	512
Benchmark Evaluations (SF-PPR-C) .....	249	1	1.50	374
Table of Activity Results (SF-PPR-D) .....	3,019	1	.75	2,264
Activity Based Expenditures (SF-PPR-E) .....	2,779	1	.333333	926
Program/Project Management (SF-PPR-F) .....	37	1	.50	19

*Estimated Total Annual Burden Hours:* 13,868.

*Additional Information:* Copies of the proposed collection may be obtained by writing to the Administration for Children and Families, Office of Administration, Office of Information Services, 370 L'Enfant Promenade, SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer. Email address: [infocollection@acf.hhs.gov](mailto:infocollection@acf.hhs.gov). All requests should be identified by the title of the information collection.

*OMB Comment:* OMB is required to make a decision concerning the collection of information between 30 and 60 days after publication of this document in the **Federal Register**. Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication. Written comments and recommendations for the proposed information collection should be sent directly to the following Office of Management and Budget, Paperwork

Reduction Project, FAX: 202-395-6974, Attn: Desk Officer for the Administration for Children and Families.

Dated: July 18, 2007.  
**Robert Sargis,**  
*Reports Clearance Officer.*  
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**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**Administration for Children and Families**

**Proposed Information Collection Activity; Comment Request**

**Proposed Project**

*Title:* 45 CFR part 95, Section F.  
*OMB No.:* 0992-0005.  
*Description:* The Advance Planning Document (APD) process, established in

the rules at 45 CFR part 95, subpart F, is the procedure by which States request and obtain approval for Federal financial participation in their cost of acquiring Automatic Data Processing (ADP) equipment and services. State agencies that submit APD requests provide the Department of Health and Human Services (HHS) with the following information necessary to determine States' needs to acquire the requested ADP equipment and/or services:

1. A statement of need;
2. A requirements analysis and feasibility study;
3. A cost benefit analysis;
4. A proposed activity schedule; and
5. A proposed budget.

HHS' determination of a State agency's need to acquire requested ADP equipment or services is authorized at sections 402(a)(5), 452(a)(1), 1902(a)(4) and 1102 of the Social Security Act.

*Respondents:* States.