Regulatory Secretariat will be submitting to the Office of Management and Budget (OMB) a request to review and approve an extension of a previously approved information collection requirement regarding Art-in-Architecture Program National Artist Registry (GSA Form 7437).

The Art-in-Architecture Program is the result of a policy decision made in January 1963 by GSA Administrator Bernard L. Boudin who had served on the Ad Hoc Committee on Federal Office Space in 1961–1962.

The program has been modified over the years, most recently in 2009 when a requirement was instituted that all artists who want to be considered for any potential GSA commission must be included on the National Artists Registry, which serves as the qualified list of eligible artists. The program continues to commission works of art from living American artists. One-half of one percent of the estimated construction cost of new or substantially renovated Federal buildings and U.S. courthouses is allocated for commissioning works of art.

Public comments are particularly invited on: whether this collection of information is necessary and whether it will have practical utility; whether our estimate of the public burden of this collection of information is accurate, and based on valid assumptions and methodology; ways to enhance the quality, utility, and clarity of the information to be collected.

DATES: Submit comments on or before: November 19, 2012.

FOR FURTHER INFORMATION CONTACT: Ms. Jennifer Gibson, Office of the Chief Architect, Art-in-Architecture & Fine Arts Division (PCAC), 1800 F Street NW., Room 3305, Washington, DC 20405, at telephone (202) 501–0930 or via email to Jennifer.gibson@gsa.gov.

ADDRESS: Submit comments identified by Information Collection 3090–0274, Art-in-Architecture Program National Artist Registry (GSA Form 7437), by any of the following methods:

• Regulations.gov: http://www.regulations.gov.

Submit comments via the Federal eRulemaking portal by searching the OMB control number. Select the link “Submit a Comment” that corresponds with “Information Collection 3090–0274, Art-in-Architecture Program National Artist Registry (GSA Form 7437)”. Follow the instructions provided at the “Submit a Comment” screen. Please include your name, company name (if any), and “Information Collection 3090–0274, Art-in-Architecture Program National Artist Registry (GSA Form 7437)” on your attached document.

Fax: 202–501–4067.


Instructions: Please submit comments only and cite Information Collection 3090–0274, Art-in-Architecture Program National Artist Registry (GSA Form 7437), in all correspondence related to this collection. All comments received will be posted without change to http://www.regulations.gov, including any personal and/or business confidential information provided.

SUPPLEMENTARY INFORMATION:

A. Purpose

The Art-in-Architecture Program actively seeks to commission works from the full spectrum of American artists and strives to promote new media and inventive solutions for public art. The GSA Form 7437, Art-in-Architecture Program National Artist Registry, will be used to collect information from artists across the country to participate and to be considered for commissions.

B. Annual Reporting Burden

Respondents: 300.

Responses per Respondent: 1.

Total Responses: 25.

Hours per Response: .25.

Total Burden Hours: 75.

Obtaining Copies of Proposals:

Requesters may obtain a copy of the information collection documents from the General Services Administration, Regulatory Secretariat (MVCB), 1275 First Street NE., Washington, DC 20417, telephone (202) 501–4755. Please cite OMB Control No. 3090–0274, Art-in-Architecture Program National Artist Registry (GSA Form 7437), in all correspondence.

Dated: September 6, 2012.

Casey Coleman,
Chief Information Officer.

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–12–0607]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call the CDC Reports Clearance Officer at (404) 639–7570 or send an email to omb@cdc.gov. Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395–5806. Written comments should be received within 30 days of this notice.

Proposed Project


Background and Brief Description

Violence is an important public health problem. In the United States, homicide and suicide are the second and third leading causes of death, respectively, in the 1–34 year old age group. Unfortunately, public health agencies do not know much more about the problem other than the statistics and the sex, race, and age of the victims; all information obtainable from the standard death certificate. Death certificates, however, carry no information about key facts necessary for prevention such as the relationship between the victim and suspect and the circumstances of the deaths, thereby making it only possible to discern the gross contours of the problem. Furthermore, death certificates are typically available 20 months after the completion of a single calendar year. Official publications of national violent death rates, e.g., those in Morbidity and Mortality Weekly Report, rarely use data that is less than two years old. Public health interventions aimed at a moving target last seen two years ago may well miss the mark.

Local and Federal criminal justice agencies such as the Federal Bureau of Investigation (FBI) provide slightly more information about homicides, but they do not routinely collect standardized data about suicides, which are in fact
muck more common than homicides. The FBI’s Supplemental Homicide Report system (SHRs) collects basic information about the victim-suspect relationship and circumstances, however it does not link violent deaths that are part of one incident such as homicide-suicides. It also is a voluntary system in which some 10–20 percent of police departments nationwide do not participate. The FBI’s National Incident Based Reporting System (NIBRS) addresses some of these deficiencies, but it covers less of the country than SHRs, includes only homicides, and collects only police information. Also, the Bureau of Justice Statistics Reports do not use data that is less than two years old.

CDC therefore proposes to continue a state-based surveillance system for violent deaths that will provide more detailed and timely information. It taps into the case records held by medical examiners/ coroners, police, and crime labs. Data is collected centrally by each state in the system, stripped of identifiers, and then sent to the CDC. Information is collected from these records about the characteristics of the victims and suspects, the circumstances of the deaths, and the weapons involved. States use standardized data elements and software designed by CDC. Ultimately, this information will guide states in designing programs that reduce multiple forms of violence.

Neither victim families nor suspects are contacted to collect this information. All data comes from existing records and is collected by state health department staff or their subcontractors. Health departments incur an average of 2.0 hours per death to complete data collection. This is the time required to identify the deaths from death certificates, contact police and medical examiners to get copies of or to view the relevant records and enter the information into the database. Public agencies working with NVDRS states incur an average of 0.5 hours per death to retrieve and then refile records.

This revision provides updates to the coding manual which reflects improved guidance to system users for coding information to be entered into the system. The improved coding guidance in the manual ensures that data is consistently entered across users.

There are no costs to the respondents other than their time. The total estimated annual burden hours are 67,500.

### Estimated Annualized Burden Hours

<table>
<thead>
<tr>
<th>Type of respondents</th>
<th>Form name</th>
<th>Number of respondents</th>
<th>Number of responses per respondent</th>
<th>Average burden per response (in hours)</th>
</tr>
</thead>
<tbody>
<tr>
<td>State Health Departments</td>
<td>Completion of case abstraction</td>
<td>27</td>
<td>1,000</td>
<td>2.0</td>
</tr>
<tr>
<td>Public Agencies</td>
<td>Retrieving and refile records</td>
<td>27</td>
<td>1,000</td>
<td>30/60</td>
</tr>
</tbody>
</table>

Dated: September 13, 2012.

Ron A. Otten, Director, Office of Scientific Integrity, Office of the Associate Director for Science, Office of the Director, Centers for Disease Control and Prevention.

[FR Doc. 2012–23047 Filed 9–18–12; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Docket No. CDC–2012–0011]


AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: Notice of public meeting and request for comments.

SUMMARY: The Centers for Disease Control and Prevention (CDC), Food and Drug Administration (FDA), and National Institutes of Health (NIH), all located within the Department of Health and Human Services, announce a public meeting and opening of a docket concerning antimicrobial resistance. The purpose of the meeting is twofold. First, the meeting will provide an opportunity for public comment on progress made by Federal agencies in accomplishing activities outlined in “A Public Health Action Plan to Combat Antimicrobial Resistance (Action Plan)”. Secondly, the meeting will solicit input from the public regarding the Interagency Task Force on Antimicrobial Resistance (ITFAR) activities including the Annual Progress Report and the Action Plan. The meeting will take place at the Hubert H. Humphrey Building in Washington, DC, on Thursday, November 15, 2012, from 1:00 p.m. to 3:30 p.m. After welcome and introductory remarks, the meeting will be open for comments from the public. The agenda is subject to change without notice. Persons wishing to participate, including those who wish to make an oral presentation, must register in advance and provide a copy of their presentations by 12:00 p.m. EDT, Thursday, October 25, 2012.

DATES: The public meeting will be held on Thursday, November 15, 2012 in Washington, DC. The meeting will begin at 1 p.m. and end no later than 3:30 p.m. Written public comment will be accepted through 5 p.m. EST, November 5, 2012.

Deadline for Registration for all Attendees: All attendees must register by 12:00 p.m. EDT, Thursday, October 25, 2012.

Deadline for Requests for Special Accommodation: Special accommodation requests must be submitted by 12 p.m. EDT, Thursday, October 25, 2012.


Participants should be aware that the meeting location is a Federal government building; therefore, Federal security measures are applicable. Please see Building and Security Guidelines for additional information on security requirements.

You may submit comments, identified by Docket No. CDC–2012–0011 by any of the following methods:

- Mail: Marsha Jones, Office of Antimicrobial Resistance, Centers for Disease Control and Prevention, 1600 Clifton Road, NE., Mailstop C–12, Atlanta, GA 30333.

Instructions: All submissions received must include the agency name and docket number. All relevant comments received will be posted without change to http://regulations.gov, including any