CONTESTING RECORD PROCEDURE:

Individuals who want to amend TSP records about themselves must submit a detailed written explanation as to why information regarding them is inaccurate or incorrect, as follows:

a. Participants who are current Federal employees must write their employing agency to request amendment of personnel records regarding employment status, retirement coverage, vesting code, and TSP service computation date, or payroll records regarding the agency's and the participant's contributions and adjustments to contributions. A request to the employing agency must be made in accordance with that agency's Privacy Act regulations or that agency's procedures. For other information regarding their TSP accounts, participants who are Federal employees must submit a request to the TSP Service Office.

b. Participants who have separated from Federal employment and spouses, former spouses, and beneficiaries of participants must submit a request to the TSP Service Office.

c. Individuals must provide their Social Security number and name, and they may also need to provide other information for their records to be located and identified.

The employing agency or the TSP Service Office will follow the procedures set forth in 5 CFR part 1605, Error Correction Regulations, in responding to requests to correct contribution errors.

RECORD SOURCE CATEGORIES:

The information in this system is obtained from the following sources:

a. The individual to whom the information pertains;

b. Agency payroll and personnel records;

c. Court orders; or

d. Spouses, former spouses, other family members, beneficiaries, legal guardians, and personal representatives (executors, administrators).

[FR Doc. 2014–08398 Filed 4–14–14; 8:45 am]

BILLING CODE 6760–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–14–14GB]

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, call (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 20503 or by fax to (202) 395–5806. Written comments should be received within 30 days of this notice.

Proposed Project

Become a Partner—New—Office of Public Health Preparedness and Response (OPHPR), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The Office of Public Health Preparedness and Response (OPHPR) provide strategic direction, ongoing support, and coordination for CDC's portfolio of emergency preparedness and response activities. CDC and OPHPR work every day to keep America safe from all-hazards, focusing on chemical, biological, radiological and nuclear as well as naturally-occurring threats, both foreign and domestic.

OPHPR's mission is critically dependent on effectively engaging outside partners to maximize resources and overall impact. Therefore, OPHPR seeks ways to improve its current partner strategy to engage new partners. Forging strategic alliances with diverse stakeholders is critical as OPHPR works to keep America safe from all health, safety, and security threats. Health security is a national challenge that calls for a national, whole community solution.

New partners who do not have an explicit mission statement related to public health preparedness and response are difficult to identify; therefore, OPHPR must use a creative method that allows groups and individuals to self-identify their interest in partnerships—such as an online form housed on CDC's public Web site. By identifying new partners, OPHPR will strengthen its ability to collaborate with a broader audience of stakeholders thereby, strengthening our collective voice on public health preparedness issues to keep our nation's health secure. OPHPR will use the information submitted through this online form to determine who in our agency would be the best liaison for this potential partner, and then follow up on this information with a phone call to further assess how we can begin building and effectively managing this new relationship.

CDC requests Office of Management and Budget (OMB) approval to collect information for three years.

Description

The ''Become a Partner'' template is a single, double-sided page that will be used as an online form for anyone voluntarily exploring how to partner with OPHPR. This form will dramatically reduce the burden on respondents and employees by allowing self-identification of partnership interests and collecting information to determine partnership needs and opportunities. The questions in the form specifically request name, address, phone, email, Web site, and a combination of five questions related to partnership interests. The questions asked will help determine if the interested party wants to receive information available through OPHPR, if they want to exchange information that is mutually beneficial for cross-promotion, if they coordinate any activities that support public health preparedness, and if they offer additional services to support public health (not already listed above). Finally, they will be asked to identify the most relevant partnership interests within OPHPR categories.

Ultimately, the form will allow OPHPR to identify and then engage interested partners in meaningful collaborations for the purpose of expanding, enhancing and sustaining public health preparedness and response infrastructure.

We estimate a total of 200 external governmental and non-governmental organizational respondents annually. The ''Become a Partner'' questionnaire is estimated to take 15 minutes and the ''Become a Partner'' follow-up questionnaire is estimated to take 30 minutes to complete. Therefore, the total estimated annualized burden for this information collection is estimated to be 75 hours.

There are no costs to respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hrs.)
General public; specifically targeting external governmental and non-governmental organizations including non-profit organizations, trade associations, academic and research institutions, and the private sector.	Become a Partner	100	1	15/60
General public; specifically targeting external governmental and non-governmental organizations including non-profit organizations, trade associations, academic and research institutions, and the private sector.	Become a Partner Follow-Up Questions.	100	1	30/60

Leroy Richardson,

Chief, Information Collection Review Office, Office of Scientific Integrity, Office of the Associate Director for Science, Office of the Director, Centers for Disease Control and Prevention.

[FR Doc. 2014–08446 Filed 4–14–14; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. FDA–2012–D–0848]

Compliance Policy Guide Regarding Canned Ackee, Frozen Ackee, and Other Ackee Products—Hypoglycin A Toxin; Availability

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA or we) is announcing the availability of the Compliance Policy Guide (CPG) Sec. 550.050 Canned Ackee, Frozen Ackee, and Other Ackee Products—Hypoglycin A Toxin. The CPG provides guidance for FDA staff on our enforcement criteria for canned ackee, frozen ackee, and other ackee products that contain hypoglycin A.

DATES: Submit either electronic or written comments on the CPG at any time.

ADDRESSES: Submit written requests for single copies of the CPG to the Office of Policy and Risk Management, Office of Regulatory Affairs, Office of Global Regulatory Operations and Policy, Food and Drug Administration, 12420 Parklawn Dr., Rockville, MD 20857. Send two self-addressed adhesive labels to assist that office in processing your request, or fax your request to 301–827–3670. See the **SUPPLEMENTARY INFORMATION** section for electronic access to the guidance.

Submit electronic comments on the CPG to *http://www.regulations.gov*. Submit written comments to the Division of Dockets Management (HFA–305), Food and Drug Administration, 5630 Fishers Lane, Rm. 1061, Rockville, MD 20852.

FOR FURTHER INFORMATION CONTACT: Yinqing Ma, Center for Food Safety and Applied Nutrition (HFS–317), Food and Drug Administration, 5100 Paint Branch Pkwy., College Park, MD 20740, 240–402–1700.

SUPPLEMENTARY INFORMATION:

I. Background

We are announcing the availability of CPG Sec. 550.050 Canned Ackee, Frozen Ackee, and Other Ackee Products—Hypoglycin A Toxin. The CPG is being issued consistent with our good guidance practices regulation (21 CFR 10.115). The CPG represents our current thinking on this topic. It does not create or confer any rights for or on any person and does not operate to bind FDA or the public. An alternative approach may be used if such approach satisfies the requirements of the applicable statutes and regulations.

In the **Federal Register** of November 8, 2012 (77 FR 67013), we announced the availability of draft CPG Sec. 550.050 Canned Ackee, Frozen Ackee, and Other Ackee Products—Hypoglycin A Toxin and gave interested parties an opportunity to submit comments by January 7, 2013, for us to consider before beginning work on the final version of the CPG. We received one comment that did not pertain to the draft CPG. We are issuing the final version of the CPG with editorial changes, but with no substantive changes.

The CPG announced in this notice finalizes the draft CPG dated November 2012.

II. Comments

Interested persons may submit either written comments regarding the CPG to the Division of Dockets Management (see **ADDRESSES**) or electronic comments regarding the CPG to *http://www.regulations.gov*. It is only necessary to send one set of comments. Identify comments with the docket number found in brackets in the heading of this document. Received comments may be seen in the Division of Dockets Management between 9 a.m. and 4 p.m., Monday through Friday, and will be posted to the docket at *http://www.regulations.gov*.

III. Electronic Access

Persons with access to the Internet may obtain the CPG from FDA's Office of Regulatory Affairs CPG history page at *http://www.fda.gov/ICECI/ComplianceManuals/CompliancePolicyGuidanceManual/default.htm* or from *http://www.regulations.gov*. Use the FDA Web site listed in the previous sentence to find the most current version of the guidance.

Dated: April 9, 2014.

Leslie Kux,

Assistant Commissioner for Policy.

[FR Doc. 2014–08428 Filed 4–14–14; 8:45 am]

BILLING CODE 4160–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Proposed Collection; 60-Day Comment Request: NIMH Database of Cognitive Training and Remediation Studies (DCTRS) (NIMH)

SUMMARY: In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, for opportunity for public comment on proposed data collection projects, the National Institute of Mental Health (NIMH), National Institutes of Health (NIH), will publish periodic summaries of proposed projects to be submitted to the Office of Management and Budget (OMB) for review and approval.