''[w]ithin 30 days after the Secretary receives service of any petition filed under section 2111 the Secretary shall publish notice of such petition in the **Federal Register**.'' Set forth below is a list of petitions received by HRSA on March 1, 2014, through March 31, 2014. This list provides the name of petitioner, city and state of vaccination (if unknown then city and state of person or attorney filing claim), and case number. In cases where the Court has redacted the name of a petitioner and/or the case number, the list reflects such redaction.

Section 2112(b)(2) also provides that the special master ''shall afford all interested persons an opportunity to submit relevant, written information'' relating to the following:

1. The existence of evidence ''that there is not a preponderance of the evidence that the illness, disability, injury, condition, or death described in the petition is due to factors unrelated to the administration of the vaccine described in the petition,'' and

2. Any allegation in a petition that the petitioner either:

(a) ''Sustained, or had significantly aggravated, any illness, disability, injury, or condition not set forth in the Vaccine Injury Table but which was caused by'' one of the vaccines referred to in the Table, or

(b) ''Sustained, or had significantly aggravated, any illness, disability, injury, or condition set forth in the Vaccine Injury Table the first symptom or manifestation of the onset or significant aggravation of which did not occur within the time period set forth in the Table but which was caused by a vaccine'' referred to in the Table.

In accordance with Section 2112(b)(2), all interested persons may submit written information relevant to the issues described above in the case of the petitions listed below. Any person choosing to do so should file an original and three (3) copies of the information with the Clerk of the U.S. Court of Federal Claims at the address listed above (under the heading **FOR FURTHER INFORMATION CONTACT**), with a copy to HRSA addressed to Director, Division of Vaccine Injury Compensation Program, Healthcare Systems Bureau, 5600 Fishers Lane, Room 11C–26, Rockville, MD 20857. The Court's caption (Petitioner's Name v. Secretary of Health and Human Services) and the docket number assigned to the petition should be used as the caption for the written submission. Chapter 35 of title 44, United States Code, related to paperwork reduction, does not apply to information required for purposes of carrying out the Program.

Dated: April 19, 2014.

Mary K. Wakefield,

Administrator.

List of Petitions Filed

1. Dawn Somelofski on behalf of A.S., Albany, New York, Court of Federal Claims No: 14–0169V
2. Mikayla Rose Burchill, St. Charles, Illinois, Court of Federal Claims No: 14–0176V
3. Matthew Andrews, Cincinnati, Ohio, Court of Federal Claims No: 14–0181V
4. Thomas and Ashley Saunders on behalf of T.A.S., Evans, Georgia, Court of Federal Claims No: 14–0184V
5. Michelle Schneider, Washington District of Columbia, DC, Court of Federal Claims No: 14–0185V
6. Jana Wilkes on behalf of D.N.T., Fort Worth, Texas, Court of Federal Claims No: 14–0186V
7. Itza Mejia on behalf of Brenda Mejia, Deceased, Downey, California, Court of Federal Claims No: 14–0189V
8. Andy De' on behalf of Annapoorna ''Uma'' De', Irving, Texas, Court of Federal Claims No: 14–0190V
9. Kyle and Shannon Carda on behalf of G.J.C., Sioux Falls, South Dakota, Court of Federal Claims No: 14–0191V
10. Bruce McDonald, Riverdale, Georgia, Court of Federal Claims No: 14–0192V
11. Miranda Hoffman, Tuscaloosa, Alabama, Court of Federal Claims No: 14–0195V
12. Marie Verdier, Georgetown, Delaware, Court of Federal Claims No: 14–0196V
13. Martin D. Casper, San Diego, California, Court of Federal Claims No: 14–0197V
14. Stephen Wallen, Colorado Springs, Colorado, Court of Federal Claims No: 14–0209V
15. Alex Joiner, Guy C. Joiner, Dwain Joiner, Dorothy Jean Disher, Linda Guagliardo, and Robbin Thompson, on behalf of Henrietta Duplessis Joiner, Deceased, New Orleans, Louisiana, Court of Federal Claims No: 14–0211V
16. Caylee Harrington, Tempe, Arizona, Court of Federal Claims No: 14–0212V
17. Melodie Rose on behalf of Allison Rose, Mountain View, California, Court of Federal Claims No: 14–0215V
18. Damien Dufour, Lewiston, Maine, Court of Federal Claims No: 14–0219V
19. Michael Foy, Mayfield, Kentucky, Court of Federal Claims No: 14–0220V
20. Cynthia Winward on behalf of James Winward, Yuba City, California, Court of Federal Claims No: 14–0223V
21. Paul Drobbin, West Long Branch, New Jersey, Court of Federal Claims No: 14–0225V
22. Bridget Sullivan on behalf of James Sullivan, Granard, County Longford, Ireland, Court of Federal Claims No: 14–0226V
23. Krystyn Snyder, Pittsburgh, Pennsylvania, Court of Federal Claims No: 14–0227V
24. Janice D. Whitfield, Kentwood, Michigan, Court of Federal Claims No: 14–0231V
25. Lisa Brown and Christopher Brown on behalf of Z.B., Torrington, Connecticut, Court of Federal Claims No: 14–0234V
26. Victoria Nifakos, Loxahatchee, Florida, Court of Federal Claims No: 14–0236V
27. Linda Leggett, Hattiesburg, Mississippi, Court of Federal Claims No: 14–0238V
28. James Schutte on behalf of Carolyn Schutte, Excelsior Springs, Missouri, Court of Federal Claims No: 14–0239V
29. Carey Sweet, Sacramento, California, Court of Federal Claims No: 14–0240V
30. Brian Lauer, Boston, Massachusetts, Court of Federal Claims No: 14–0244V
31. Joaquim Pereira, Boston, Massachusetts, Court of Federal Claims No: 14–0246V
32. Michael Askew, Durham, North Carolina, Court of Federal Claims No: 14–0252V
33. Charmaine Johnson on behalf of K.J., Houston, Texas, Court of Federal Claims No: 14–0254V

[FR Doc. 2014–09422 Filed 4–24–14; 8:45 am]

BILLING CODE 4165–15–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Submission for OMB Review; 30-Day Comment Request, Questionnaire Cognitive Interviewing and Pretesting (NCI)

SUMMARY: Under the provisions of Section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the National Institutes of Health (NIH), has submitted to the Office of Management and Budget (OMB) a request for review and approval of the information collection listed below. This proposed information collection was previously published in

the **Federal Register** on January 3, 2014, (Vol. 79, p. 402) and allowed 60-days for public comment. No public comments were received. The purpose of this notice is to allow an additional 30 days for public comment. The National Cancer Institute (NCI), National Institutes of Health, may not conduct or sponsor, and the respondent is not required to respond to, an information collection that has been extended, revised, or implemented on or after October 1, 1995, unless it displays a currently valid OMB control number.

Direct Comments To OMB: Written comments and/or suggestions regarding the item(s) contained in this notice, especially regarding the estimated public burden and associated response time, should be directed to the: Office of Management and Budget, Office of Regulatory Affairs, *OIRA_submission@omb.eop.gov* or by fax to 202–395–6974, Attention: NIH Desk Officer.

DATES: *Comment Due Date:* Comments regarding this information collection are best assured of having their full effect if received within 30-days of the date of this publication.

FOR FURTHER INFORMATION CONTACT: To obtain a copy of the data collection plans and instruments or request more information on the proposed project contact: Gordon Willis, Division of Cancer Control and Population Sciences, 9609 Medical Center Drive, Rm 3E358, Bethesda, MD 20892–9762 or call non-toll-free number 240–276–6788 or Email your request, including your address to: *willis@mail.nih.gov*. Formal requests for additional plans and instruments must be requested in writing.

Proposed Collection: Questionnaire Cognitive Interviewing and Pretesting (NCI), 0925–0589, Revision, National Cancer Institute (NCI), National Institutes of Health (NIH).

Need and Use of Information Collection: For many surveys and self-report-based data collection efforts, it is advantageous to the government if development follows a pretesting sequence equivalent to that used at National Center for Health Statistics or the Census Bureau. For example, the Health Information National Trends Survey (HINTS: OMB No. 0925–0538) has undergone multiple cycles of cognitive testing to refine both the questionnaire, and supporting materials such as advance letters and brochures. The types of activities covered by this Generic request include: (1) Survey material development and pretesting based on cognitive interviewing methodology and use of focus groups, (2) Research on the cognitive aspects of survey methodology, (3) Research on computer-user interface design for computer-assisted instruments, also known as Usability Testing, (4) Pilot Household interviews are pilot tests (either personal, telephone, or Web-based) conducted with respondents using professional field interviewers; and (5) Formative research that depends on the use of interviewing techniques to develop products such as research priorities, or expert consensus on best practices. Additionally, formative research has been increasingly used to develop new data collection instruments using psychometric procedures, including Computerized Adaptive Testing (CAT). Test-retest reliability testing can also be used as a type of formative research in the development of questionnaires, software applications that depend on self-report, and other measurement instruments.

OMB approval is requested for 3 years. There are no costs to respondents other than their time. The total estimated annualized burden hours are 3,600.

3-YEAR ESTIMATED BURDEN HOURS

Type of respondents	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Burden hours
Physicians, Scientists and similar Respondents	1,200	1	75/60	1,500
Experts in their Field	600	1	75/60	750
Administrators/Managers	600	1	75/60	750
General Public	1,200	1	30/60	600

Dated: April 21, 2014.

Vivian Horovitch-Kelley,

NCI Project Clearance Liaison, National Institutes of Health.

[FR Doc. 2014–09446 Filed 4–24–14; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Submission for OMB Review; 30-Day Comment Request; Next Series of Tobacco Use Supplements to the Current Population Survey (TUS–CPS) (NCI)

SUMMARY: Under the provisions of Section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the National Institutes of Health (NIH), has submitted to the Office of Management and Budget (OMB) a request for review and approval of the information collection listed below. This proposed information collection was previously published in the **Federal Register** on January 22 (Volume 79, P. 3598) and allowed 60-days for public comment. There were a total of three comments. Two of the three comments were requests for a copy of the questionnaire and plans, which were sent to the requestors. One of these requestors commented in support of FDA's co-sponsorship with NCI of the TUS–CPS and NCI/NIH working with sister agencies and HHS to harmonize and coordinate tobacco use information across various federal surveys. It further stated the importance of this kind of HHS evaluation with sister agencies, made specific suggestions what this should include, and concluded with offering assistance. Additionally, the third public comment was about spending of tax-payers' dollars. The purpose of this notice is to allow an additional 30 days for public comment. The National Cancer Institute (NCI), National Institutes of Health, may not conduct or sponsor, and the respondent is not required to respond to, an information collection that has been extended, revised, or implemented on or after October 1, 1995, unless it displays a currently valid OMB control number.

Direct Comments to OMB: Written comments and/or suggestions regarding the item(s) contained in this notice, especially regarding the estimated public burden and associated response time, should be directed to the: Office of Management and Budget, Office of Regulatory Affairs, *OIRA_submission@omb.eop.gov* or by fax to 202–395–6974, Attention: NIH Desk Officer.