(202) 401–6984; Email: *shannon.rudisill@acf.hhs.gov*.

SUPPLEMENTARY INFORMATION: One of the stated goals of the Tribal MIECHV program is to support and strengthen cooperation and coordination, and promote linkages among various programs that serve pregnant women, expectant fathers, young children, and families, resulting in the establishment of coordinated and comprehensive early childhood systems in grantee communities. The Tribal MIECHV program expansion supplements for the Tribal Early Learning Initiative will allow for more integrated and efficient activities among the four grantees who currently receive grants from the 3 early learning programs administered by ACF (American Indian/Alaska Native Head Start/Early Head Start, Tribal Child Care and Development Fund, and Tribal MIECHV).

The continued activities of the four grantees are expected to result in models for tribal early learning systems that can be replicated in other tribal communities. In addition, the supplements will expand the reach and impact of technical assistance efforts by supporting and strengthening existing coordination and collaboration activities and expanding the scope of additional such activities in tribal communities.

A supplemental award of $45,000 is made to White Earth Band of Chippewa Indians in White Earth, MN, to support the building of an early childhood system and their focused efforts in implementing a cross-tribe care coordination data system, known as WE–CARE (White Earth Coordinated Assessment, Resources, and Education).

A supplemental award of $35,000 is made to Choctaw Nation of Oklahoma in Durant, OK, to support the building of connections across tribal early childhood programs, including the development of a tribal resource directory for families, and the very large service area they are attempting to reach.

Supplemental awards of $25,000 each are made to the Confederated Salish and Kootenai Tribes in Pablo, MT, and to Pueblo of San Felipe in San Felipe, NM, to support their continuing efforts to build early childhood systems. These efforts have included joint professional development activities, community events to highlight the importance of early childhood and the available programming, and strong relationship-building across Head Start, child care, and home visiting programs.

Statutory Authority: Awards are supported by section 511(h)(2)(A) of Title V of the Social Security Act, as added by Section 2951 of the Patient Protection and Affordable Care Act, Pub. L. 111–148, also known as the Affordable Care Act (ACA).

Melody Wayland,

Senior Grants Policy Specialist, Office of Administration, Office of Financial Services, Division of Grants Policy.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

[CFDA Number: 93.676]

Announcement of the Award of Two Single-Source Program Expansion Supplement Grants To Support Legal Services to Refugees Under the Unaccompanied Alien Children's Program

AGENCY: Office of Refugee Resettlement, ACF, HHS.

ACTION: The Administration for Children and Families (ACF), Office of Refugee Resettlement (ORR), announces the award of two single-source program expansion supplement grants to the United States Conference of Catholic Bishops in Washington, DC, and to the U.S. Committee for Refugees and Immigrants in Arlington, VA, under the Unaccompanied Alien Children's (UAC) Program to support post-release legal services.

SUMMARY: The Administration for Children and Families (ACF), Office of Refugee Resettlement (ORR) announces the award of two single-source program expansion supplement grants totaling of $4,261,268. The expansion supplement grants will support the need for legal services by unaccompanied alien children released from the custody of ORR.

FOR FURTHER INFORMATION CONTACT: Jallyn Sualog, Director, Division of Children's Services, Office of Refugee Resettlement, 901 D Street SW., Washington, DC 20447, Telephone (202) 401–4997. Email: *jallyn.sualog@acf.hhs.gov*

SUPPLEMENTARY INFORMATION: The Unaccompanied Alien Children's program ensures the appropriate placement of all Department of Homeland Security (DHS) UAC referrals within specified timeframes and requires that a range of custodial/residential shelter care and services are provided to the minor detainees and, in certain cases, continued services are authorized after a child is released from ORR residential shelter care. The supplemental awards will support and expand direct legal representation services for unaccompanied minor children after their release from ORR custody.

As part of this administration-wide effort, HHS is proposing a $9 million direct legal representation project that will provide representation to 2,600 unaccompanied children throughout their immigration proceedings. In order to implement this Departmental priority, ORR is awarding supplemental funds totaling $4,261,268 in FY 2014 to provide direct representation to 1,222 children and plans to provide the remaining funds for this project in FY 2015. The initial program will address legal services to post-release alien minor children in Los Angeles, CA; Houston, TX; Miami, FL; Baltimore, MD; Arlington, VA; Dallas, TX; Memphis, TN; New Orleans, LA; and Phoenix, AZ. Recognizing that this will cover only a portion of children released to sponsors in these cities, HHS is committed to continuing to work with DHS and the Department of Justice (DOJ) to determine how best to prioritize the use of these 2,600 slots in the provision of legal services to this vulnerable population.

Under the FY 2014 supplemental awards, the United States Conference of Catholic Bishops in Washington, DC, will receive a supplemental award of $2,226,513 and to the U.S. Committee for Refugees and Immigrants in Arlington, VA, will receive a supplemental award of $2,034,755.

DATES: Supplemental award funds will support activities from September 30, 2014 through September 29, 2015.

Statutory Authority: This program is authorized by—

(A) Section 462 of the Homeland Security Act of 2002, which in March 2003, transferred responsibility for the care and custody of Unaccompanied Alien Children from the Commissioner of the former Immigration and Naturalization Service (INS) to the Director of ORR of the Department of Health and Human Services (HHS).

(B) The Flores Settlement Agreement, Case No. CV85–4544RJK (C. D. Cal. 1996), as well as the William Wilberforce Trafficking Victims Protection Reauthorization Act of 2008 (Pub. L. 110–457), which authorizes post release services under certain conditions to eligible children. All programs must comply with the Flores Settlement Agreement, Case No. CV85–4544–RJK (C.D. Cal. 1996), pertinent

regulations and ORR policies and procedures.

Melody Wayland,

Senior Grants Policy Specialist, Office of Administration, Office of Financial Services, Division of Grants Policy.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. FDA–2014–N–1533]

Agency Information Collection Activities; Proposed Collection; Comment Request; Establishment of a Tobacco User Panel

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing an opportunity for public comment on the proposed collection of certain information by the Agency. Under the Paperwork Reduction Act of 1995 (the PRA), Federal Agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information and to allow 60 days for public comment in response to the notice. This notice solicits comments on the establishment of a probability-based panel of tobacco users.

DATES: Submit either electronic or written comments on the collection of information by December 15, 2014.

ADDRESSES: Submit electronic comments on the collection of information to *http://www.regulations.gov.* Submit written comments on the collection of information to the Division of Dockets Management (HFA–305), Food and Drug Administration, 5630 Fishers Lane, Rm. 1061, Rockville, MD 20852. All comments should be identified with the docket number found in brackets in the heading of this document.

FOR FURTHER INFORMATION CONTACT: FDA PRA Staff, Office of Operations, Food and Drug Administration, 8455 Colesville Rd., COLE–14526, Silver Spring, MD 20993–0002, *PRAStaff@fda.hhs.gov.*

SUPPLEMENTARY INFORMATION: Under the PRA (44 U.S.C. 3501–3520), Federal Agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. ''Collection of information'' is defined in 44 U.S.C. 3502(3) and 5 CFR 1320.3(c) and includes Agency requests or requirements that members of the public submit reports, keep records, or provide information to a third party. Section 3506(c)(2)(A) of the PRA (44 U.S.C. 3506(c)(2)(A)) requires Federal Agencies to provide a 60-day notice in the **Federal Register** concerning each proposed collection of information, including each proposed collection of information, before submitting the collection to OMB for approval. To comply with this requirement, FDA is publishing notice of the proposed collection of information set forth in this document.

With respect to the following collection of information, FDA invites comments on these topics: (1) Whether the proposed collection of information is necessary for the proper performance of FDA's functions, including whether the information will have practical utility; (2) the accuracy of FDA's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques, when appropriate, and other forms of information technology.

Establishment of a Tobacco User Panel—(OMB Control Number 0910–NEW)

The Food and Drug Administration's Center for Tobacco Products (CTP) proposes to establish a high quality, probability-based, primarily Web-based panel of 4,000 tobacco users. The panel will include individuals who can participate in up to 8 studies over a 3-year period to assess consumers' responses to tobacco marketing, warning statements, product labels, and other communications about tobacco products. CTP proposed the establishment of the panel of consumers because currently existing Web-based panels have a number of significant limitations. First, most existing consumer panels are drawn from convenience samples that limit the generalizability of study findings (Baker et al., 2010). Second, although at least two probability-based panels of consumers exist in the United States, there is a concern that responses to the studies using tobacco users in these panels may be biased due to panel conditioning effects (e.g., Coen, Lorch and Piekarski, 2005; Nancarrow and Catwright, 2007). That is, consumers in these panels complete surveys so frequently that their responses may not adequately represent the population as a whole. Panel conditioning has been associated with repeated measurement on the same topic (e.g., Kruse et al., 2009), panel tenure (e.g., Coen, Lorch and Piekarski, 2005), and frequency of the survey request (e.g., Nancarrow and Catwright, 2007). This issue is of particular concern for tobacco users who represent a minority of the members in the panels, and so may be more likely to be selected for participation in experiments and/or surveys related to tobacco products. Third, a key benefit of the Web panel approach is that the surveys can include multimedia, such as images of tobacco product packages, tobacco advertising, new and existing warning statements and labels, and potential reduced harm claims in the form of labels and print advertisements. Establishing a primarily Web-based panel of tobacco users through in-person probability-based recruitment of eligible adults and limiting the number of times individuals participate in tobacco-related studies will result in nationally representative and unbiased data collection on matters of importance for FDA.

With this submission, the FDA seeks approval from OMB to establish the Tobacco User Panel, a nationally representative, primarily web-based panel of 4,000 current tobacco users. Data collection activities will involve pilot testing of panel recruitment and management procedures and systems, mail and in-person household screening, in-person recruitment of tobacco users, enrollment of selected household members, administration of a baseline survey, and panel maintenance surveys, following all required informed consent procedures for panel members. Once the panel is established, panel members will be asked to participate in up to eight experimental and observational studies over the 3-year panel commitment period. The first of these studies (Study 1) is included in this information collection request; approval for the remainder of the studies will be appear in future requests. The current request also seeks approval to conduct up to two rounds of cognitive testing of new survey items and up to two focus groups to further refine study protocols, as needed. With this clearance, study investigators will be able to use the OMB approved data collection methods where appropriate to plan and implement the national panel.

The overall purpose of the proposed data collection is to collect information from a representative sample of tobacco users to provide data that may be used