

**DEPARTMENT OF THE TREASURY****Office of Foreign Assets Control****Sanctions Action Pursuant to Executive Order 13224**

**AGENCY:** Office of Foreign Assets Control, Treasury.

**ACTION:** Notice.

**SUMMARY:** The Department of the Treasury's Office of Foreign Assets Control (OFAC) is publishing the name of 1 individual whose property and interests in property are blocked.

**DATES:** OFAC's action described in this notice was effective on March 14, 2017.

**FOR FURTHER INFORMATION CONTACT:**

Associate Director for Global Targeting, tel.: 202/622-2420, Assistant Director for Sanctions Compliance & Evaluation, tel.: 202/622-2490, Assistant Director for Licensing, tel.: 202/622-2480, Office of Foreign Assets Control, or Chief Counsel (Foreign Assets Control), tel.: 202/622-2410, Office of the General Counsel, Department of the Treasury (not toll free numbers).

**SUPPLEMENTARY INFORMATION:****Electronic Availability**

The SDN List and additional information concerning OFAC sanctions programs are available from OFAC's Web site ([www.treas.gov/ofac](http://www.treas.gov/ofac)).

**Notice of OFAC Actions**

On March 14, 2017, OFAC blocked the property and interests in property of the following 1 individual pursuant to E.O. 13224, "Blocking Property and Prohibiting Transactions With Persons Who Commit, Threaten To Commit, or Support Terrorism":

**Individual**

1. AL-'ANZI, Muhammad Hadi 'Abd-al-Rahman Fayhan Sharban (a.k.a. AL-'ANIZI, Muhammad Hadi 'Abd al-Rahman Fayhan Shariyan; a.k.a. AL-'ANIZI, Muhammad Hadi 'Abd al-Rahman Fayhan Shiryan; a.k.a. AL-'ANIZI, Muhammad Hadi 'Abd-al-Rahman Fihan Shiryan; a.k.a. AL-'ANZI, Muhammad Hadi 'Abd al-Rahman Fayhan Shariyan; a.k.a. AL-'ANZI, Muhammad Hadi 'Abd-al-Rahman Fayhan Sharyan; a.k.a. AL-'ANIZI, Muhammad Hadi 'Abd-al-Rahman Fayhan Sharyan; a.k.a. ALENEZI, Mohammad H A F; a.k.a. AL-SHAMMARI, Muhammad; a.k.a. "AL-KUWAITI, Abu Hudhayfa"; a.k.a. "HUDAYTH, Abu"; a.k.a. "HUDHAYFAH, Abu"), Kuwait; DOB 26 May 1986; nationality Kuwait; citizen Kuwait; Gender Male (individual) [SDGT] (Linked To: AL QA'IDA; Linked To: AL-NUSRAH FRONT).

Dated: March 14, 2017.

**Andrea Gacki,**

*Acting Director, Office of Foreign Assets Control.*

[FR Doc. 2017-05388 Filed 3-16-17; 8:45 am]

**BILLING CODE 4810-AL-P**

**DEPARTMENT OF VETERANS AFFAIRS**

[OMB Control No. 2900-0801]

**Agency Information Collection Under OMB Review: Non-Degenerative Arthritis (Including Inflammatory, Autoimmune, Crystalline and Infectious Arthritis) and Dysbaric Osteonecrosis Disability Benefits Questionnaire**

**AGENCY:** Veterans Benefits Administration, Department of Veterans Affairs.

**ACTION:** Notice.

**SUMMARY:** In compliance with the Paperwork Reduction Act (PRA) of 1995, this notice announces that the Veterans Benefits Administration, Department of Veterans Affairs, will submit the collection of information abstracted below to the Office of Management and Budget (OMB) for review and comment. The PRA submission describes the nature of the information collection and its expected cost and burden and it includes the actual data collection instrument.

**DATES:** Comments must be submitted on or before April 17, 2017.

**ADDRESSES:** Submit written comments on the collection of information through [www.Regulations.gov](http://www.Regulations.gov), or to Office of Information and Regulatory Affairs, Office of Management and Budget, Attn: VA Desk Officer; 725 17th St. NW., Washington, DC 20503 or sent through electronic mail to [oir\\_submission@omb.eop.gov](mailto:oir_submission@omb.eop.gov). Please refer to "OMB Control No. 2900-0801" in any correspondence.

**FOR FURTHER INFORMATION CONTACT:** Cynthia Harvey-Pryor, Enterprise Records Service (005R1B), Department of Veterans Affairs, 810 Vermont Avenue NW., Washington, DC 20420, (202) 461-5870 or email [cynthia.harvey-pryor@va.gov](mailto:cynthia.harvey-pryor@va.gov). Please refer to "OMB Control No. 2900-0801" in any correspondence.

**SUPPLEMENTARY INFORMATION:**

*Authority:* 44 U.S.C. 3501-21.

*Title:* (Non-Degenerative Arthritis (including inflammatory, autoimmune, crystalline and infectious arthritis) and Dysbaric Osteonecrosis Disability Benefits Questionnaire (VA Form 21-0960M-3).

*OMB Control Number:* 2900-0801.

*Type of Review:* Extension of a currently approved collection.

*Abstract:* VA Forms 21-0960M-3 is used to gather necessary information from a claimant's treating physician regarding the results of medical examinations.

An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The **Federal Register** Notice with a 60-day comment period soliciting comments on this collection of information was published at Volume 82 FR 9, on January 13, 2017, pages 4461 and 4462.

*Affected Public:* Individuals or Households.

*Estimated Annual Burden:* 25,000.

*Estimated Average Burden per Respondent:* 15 minutes.

*Frequency of Response:* One time.

*Estimated Number of Respondents:* 100,000.

By direction of the Secretary.

**Cynthia Harvey-Pryor,**

*Department Clearance Officer, Office of Privacy and Records Management, Department of Veterans Affairs.*

[FR Doc. 2017-05380 Filed 3-16-17; 8:45 am]

**BILLING CODE 8320-01-P**

**DEPARTMENT OF VETERANS AFFAIRS**

[OMB Control No. 2900-0747]

**Agency Information Collection Activity: Application for Disability Compensation and Related Compensation Benefits**

**AGENCY:** Veterans Benefits Administration, Department of Veterans Affairs.

**ACTION:** Notice.

**SUMMARY:** The Veterans Benefits Administration (VBA), Department of Veterans Affairs (VA), is announcing an opportunity for public comment on the proposed collection of certain information by the agency. Under the Paperwork Reduction Act (PRA) of 1995, Federal agencies are required to publish notice in the **Federal Register** concerning each proposed collection of information, including each proposed revision of a currently approved collection, and allow 60 days for public comment in response to the notice.

VA Form 21-526EZ is used to collect the information needed to process a fully developed claim for disability compensation and related compensation benefits. This form is required as part of