

shall publicly post the public comments received in their entirety.

Ann M. Sheehy,
Principal Deputy Administrator.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

National Vaccine Injury Compensation Program; List of Petitions Received

AGENCY: Health Resources and Services Administration (HRSA), Department of Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: HRSA is publishing this notice of petitions received under the National Vaccine Injury Compensation Program (the Program), as required by the Public Health Service (PHS) Act, as amended. While the Secretary of HHS is named as the respondent in all proceedings brought by the filing of petitions for compensation under the Program, the United States Court of Federal Claims is charged by statute with responsibility for considering and acting upon the petitions.

FOR FURTHER INFORMATION CONTACT: For information about requirements for filing petitions, and the Program in general, contact Lisa L. Reyes, Clerk of Court, United States Court of Federal Claims, 717 Madison Place NW, Washington, DC 20005, (202) 357–6400. For information on HRSA's role in the Program, contact the Director, Division of Injury Compensation Programs, 5600 Fishers Lane, Room 8W–25A, Rockville, Maryland 20857; 1–800–338–2382, or visit our website at: <https://www.hrsa.gov/vaccine-compensation>.

SUPPLEMENTARY INFORMATION: The Program provides a system of no-fault compensation for certain individuals who have been injured by specified childhood vaccines. Subtitle 2 of Title XXI of the PHS Act, 42 U.S.C. 300aa–10 *et seq.*, provides that those seeking compensation are to file a petition with the United States Court of Federal Claims and to serve a copy of the petition to the Secretary of HHS, who is named as the respondent in each proceeding. The Secretary has delegated this responsibility under the Program to HRSA. The Court is directed by statute to appoint special masters who take evidence, conduct hearings as appropriate, and make initial decisions as to eligibility for, and amount of, compensation.

A petition may be filed with respect to injuries, disabilities, illnesses, conditions, and deaths resulting from vaccines described in the Vaccine Injury Table (the Table) set forth at 42 CFR 100.3. This Table lists for each covered childhood vaccine the conditions that may lead to compensation and, for each condition, the time period for occurrence of the first symptom or manifestation of onset or of significant aggravation after vaccine administration. Compensation may also be awarded for conditions not listed in the Table and for conditions that are manifested outside the time periods specified in the Table, but only if the petitioner shows that the condition was caused by one of the listed vaccines.

Section 2112(b)(2) of the PHS Act, 42 U.S.C. 300aa–12(b)(2), requires that “[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 June 1, 2026, through June 30, 2026. This list provides the name of the petitioner, city, and state of vaccination (if unknown then the city and state of the person or attorney filing the 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. “[S]ustained, 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. “[S]ustained, 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 copies of the information with the Clerk of the United States 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 Injury Compensation Programs, Health Systems Bureau, 5600 Fishers Lane, 8W–25A, Rockville, Maryland 20857. The Court's caption (*Petitioner's Name v. Secretary of HHS*) 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.

Thomas J. Engels,
Administrator.

List of Petitions Filed

1. Kylie Vizzusi, Carson City, Nevada, Court of Federal Claims No: 26–0799V
2. Mary Scott, Mesquite, Texas, Court of Federal Claims No: 26–0800V
3. Sergio Tavaréz, West Lawn, Pennsylvania, Court of Federal Claims No: 26–0801V
4. Amber Campbell, Woodridge, Illinois, Court of Federal Claims No: 26–0802V
5. Rachel Seeds, Alisa Viejo, California, Court of Federal Claims No: 26–0805V
6. Michael Degarmo, Mustang, Oklahoma, Court of Federal Claims No: 26–0806V
7. Latoya Kennedy, Bellingham, Washington, Court of Federal Claims No: 26–0807V
8. Annamarie Tesoro Porter, Solvang, California, Court of Federal Claims No: 26–0810V
9. Hazel Nicholson, Pensacola, Florida, Court of Federal Claims No: 26–0811V
10. Jael Narain Mendoza, Kaplan, Louisiana, Court of Federal Claims No: 26–0815V
11. Brenda Thompson, Menomonee, Wisconsin, Court of Federal Claims No: 26–0816V
12. Elmo Peyton, Boscobel, Wisconsin, Court of Federal Claims No: 26–0817V
13. Gayle Hermann, Philadelphia, Pennsylvania, Court of Federal Claims No: 26–0818V
14. Joan Cornish, Phoenix, Arizona, Court of Federal Claims No: 26–0819V
15. Jennifer Jangula, Woodridge, Illinois, Court of Federal Claims No: 26–0821V
16. Ivan Ekblom, Grants Pass, Oregon, Court of Federal Claims No: 26–0823V
17. Kelly Rothenberger, Washington, District of Columbia, Court of Federal Claims No: 26–0824V
18. Mai Takieng, Petaluma, California, Court of Federal Claims No: 26–0825V
19. Tanisha Williams, Woodridge, Illinois, Court of Federal Claims No: 26–0826V
20. Georgine Cwynar, Machesney Park, Illinois, Court of Federal Claims No: 26–0827V
21. Joseph Pires, Wareham, Massachusetts, Court of Federal Claims No: 26–0829V
22. Anna Severina, East Meadow, New Jersey, Court of Federal Claims No: 26–

- 0830V
23. Alice Chavez, Rio Rancho, New Mexico, Court of Federal Claims No: 26–0831V
 24. Katie Sparks, Encinitas, California, Court of Federal Claims No: 26–0832V
 25. Robert Hodson, Staten Island, New York, Court of Federal Claims No: 26–0833V
 26. Meredith Crowley, Brooklyn, New York, Court of Federal Claims No: 26–0834V
 27. Yoonjin Shu, Los Angeles, California, Court of Federal Claims No: 26–0835V
 28. Hamilton Lombard, Charlottesville, Virginia, Court of Federal Claims No: 26–0836V
 29. April Moses, Kernersville, North Carolina, Court of Federal Claims No: 26–0837V
 30. Skye Padilla, Sun City, Arizona, Court of Federal Claims No: 26–0838V
 31. Erica Jesters on behalf of M.V., Towson, Maryland, Court of Federal Claims No: 26–0839V
 32. Justin Malecki on behalf of A.M., Denton, Maryland, Court of Federal Claims No: 26–0840V
 33. Mark Burton, New York, New York, Court of Federal Claims No: 26–0841V
 34. Anne Guinane, Chicago, Illinois, Court of Federal Claims No: 26–0850V
 35. Marie Therese Boylan, Seminole, Florida, Court of Federal Claims No: 26–0851V
 36. Brenda Nevins, Appleton, Wisconsin, Court of Federal Claims No: 26–0852V
 37. Kristopher Leitzinger, Manitowoc, Wisconsin, Court of Federal Claims No: 26–0854V
 38. Keely Hess, Washington, District of Columbia, Court of Federal Claims No: 26–0856V
 39. Erika Ecdao, Washington, District of Columbia, Court of Federal Claims No: 26–0857V
 40. Sara Smith, San Diego, California, Court of Federal Claims No: 26–0859V
 41. Andrea McQuarrie, Swansea, Massachusetts, Court of Federal Claims No: 26–0860V
 42. Carol Sample, Austin, Texas, Court of Federal Claims No: 26–0862V
 43. Gulrukh Urunova, Philadelphia, Pennsylvania, Court of Federal Claims No: 26–0865V
 44. Victoria Anthony, Dresher, Pennsylvania, Court of Federal Claims No: 26–0868V
 45. Lisa Sackie, Signal Hill, California, Court of Federal Claims No: 26–0869V
 46. Margarita Harrington, Woodridge, Illinois, Court of Federal Claims No: 26–0871V
 47. Paul Montalto, Fairfax, Virginia, Court of Federal Claims No: 26–0872V
 48. Sue Santavicca, Washington, District of Columbia, Court of Federal Claims No: 26–0873V
 49. Amanda Weiss, Mundelein, Illinois, Court of Federal Claims No: 26–0874V
 50. Sandra Yelle, Washington, District of Columbia, Court of Federal Claims No: 26–0875V
 51. Mary Whitten, Louisville, Kentucky, Court of Federal Claims No: 26–0876V
 52. Sheila Tripp, Englewood, New Jersey, Court of Federal Claims No: 26–0877V
 53. Melissa Sosa, Raymondville, Texas, Court of Federal Claims No: 26–0879V
 54. Hailee Toney, Spring Hill, Tennessee, Court of Federal Claims No: 26–0881V
 55. Jessica De La Torre, Chicago, Illinois, Court of Federal Claims No: 26–0882V
 56. Sissie Hasaio, Chicago, Illinois, Court of Federal Claims No: 26–0883V
 57. Alma Gonzalez, Dresher, Pennsylvania, Court of Federal Claims No: 26–0884V
 58. Korey Hunsinger, Aventura, Florida, Court of Federal Claims No: 26–0888V
 59. Lindsay Alberti, Woodridge, Illinois, Court of Federal Claims No: 26–0889V
 60. Masika Bryce, Altamonte Springs, Florida, Court of Federal Claims No: 26–0890V
 61. Edward Hennessy, Washington, District of Columbia, Court of Federal Claims No: 26–0891V
 62. Yosan Kubrom, New York, New York, Court of Federal Claims No: 26–0893V
 63. Tonja Boehm Morse, Revere, Massachusetts, Court of Federal Claims No: 26–0895V
 64. William Harrington, Pineville, Louisiana, Court of Federal Claims No: 26–0896V
 65. Justin Sowders on behalf of the estate of W.S., Deceased, Middleburg Heights, Ohio, Court of Federal Claims No: 26–0897V
 66. Samantha Miller, Dresher, Pennsylvania, Court of Federal Claims No: 26–0902V
 67. Valerie Mirwaldt, Fort Wayne, Indiana, Court of Federal Claims No: 26–0904V
 68. Tanya Burnam, Nashville, Tennessee, Court of Federal Claims No: 26–0905V
 69. Wendy Doney, Chicago, Illinois, Court of Federal Claims No: 26–0910V
 70. Leigh-Anne Marie Rockower, Glens Falls, New York, Court of Federal Claims No: 26–0912V
 71. Shareef Childs, Stanley, Wisconsin, Court of Federal Claims No: 26–0913V
 72. Socorro Alvarado-Silva, Milwaukee, Wisconsin, Court of Federal Claims No: 26–0914V
 73. Arvinhdh Kanagasundram, Nashville, Tennessee, Court of Federal Claims No: 26–0915V
 74. Stacy Jean, Coral Springs, Florida, Court of Federal Claims No: 26–0920V
 75. Tamara Dobbins, Chicago, Illinois, Court of Federal Claims No: 26–0921V

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Government-Owned Inventions; Availability for Licensing

AGENCY: National Institutes of Health, HHS.

ACTION: Notice.

SUMMARY: The National Institute of Allergy and Infectious Diseases (NIAID), an institute of the National Institutes of Health (NIH), Department of Health and Human Services (HHS), is giving notice of the invention listed below, which is owned by an agency of the U.S. Government and is available for

licensing to achieve expeditious commercialization of results of federally funded research and development. Foreign patent applications are filed on selected inventions to extend market coverage for companies and may also be available for licensing.

FOR FURTHER INFORMATION CONTACT:

Inquiries related to this licensing opportunity should be directed to: Yogikala Prabhu at 202–365–4785, or yogikala.prabhu@nih.gov. Licensing information may be obtained by communicating with the Technology Transfer and Intellectual Property Office, National Institute of Allergy and Infectious Diseases, 5601 Fishers Lane, Rockville, MD 20852; tel. 301–496–2644. A signed Confidential Disclosure Agreement will be required to receive copies of unpublished information related to the invention.

SUPPLEMENTARY INFORMATION:

Technology description follows:

Characterization of Novel Pan Anti-HLA Antibodies That Block LILR Inhibitory Receptors and Activate Anti-Tumor Immunity

Description of Technology

Cancer immunotherapy has transformed treatment for some patients, but many tumors still do not respond well to current options, including checkpoint inhibitors. Researchers at NIAID's Laboratory of Immune System Biology (LISB) have developed new antibodies designed to help the immune system fight tumors. These lab-made antibodies, called pan-anti-HLA monoclonal antibodies, block signals that can limit immune cell activity.

These signals are part of a pathway that regulates immune responses. In this pathway, inhibitory receptors in the leukocyte immunoglobulin-like receptor (LILR) family, found on many immune cells like natural killer (NK) cells and T cells, act like a brake when they interact with molecules called MHC–I. The antibodies are designed to block this interaction and release that brake. Earlier studies showed that antibodies targeting this interaction could activate both innate immunity, the body's first line of defense, and adaptive immunity, the part of the immune system that builds more targeted responses and immune memory.

The new pan anti-HLA antibodies 3C10 and 15B1 block LILR interactions by binding to a different site on MHC–I than previously developed antibodies DX17 and W6/32. They also bind more than 50 times better and activate human NK and T cells for tumor control. To support development of next-generation checkpoint therapies, researchers will