

collection, TSA is soliciting comments to—

(1) Evaluate whether the proposed information requirement is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;

(2) Evaluate the accuracy of the agency's estimate of the burden;

(3) Enhance the quality, utility, and clarity of the information to be collected; and

(4) Minimize the burden of the collection of information on those who are to respond, including using appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

Information Collection Requirement

OMB Control Number 1652-0030; TSA Customer Comment Card. TSA provides airport passengers with paper and electronic methods of providing feedback to TSA regarding their experiences with TSA security procedures. The collection of information allows TSA to evaluate and address customer concerns about security procedures and policies.

Passengers may request paper TSA Customer Comment Cards to provide feedback, complaints, or compliments. For passengers who deposit their cards in the designated drop-boxes, TSA staff at airports collect the cards, categorize comments, enter the results into an online system for reporting, and respond to passengers as appropriate. If the passenger voluntarily provides contact information, TSA will use the contact information to respond to the passenger's comments.

In addition, passengers may make comments or requests, or file complaints, via online submission forms available at www.tsa.gov/contact/contact-forms. The electronic forms, which the TSA Contact Center handles, include the following forms:

- *Complaint and Compliment.* Like the paper comment card, the electronic Complaint and Compliment form is intended to allow passengers to provide feedback to TSA regarding their experiences with TSA security procedures. Passengers may also use this form to file Disability or Civil Rights and Civil Liberties complaints.

- *TSA PreCheck®.* This electronic form allows passengers to share concerns about not receiving TSA PreCheck on their boarding pass or other concerns.

- *Request for Information.* This electronic form allows passengers to submit an inquiry about TSA policies and procedures, such as traveling with

medical conditions, prohibited and permitted items, or security screening.

- *TSA Cares.* This electronic form allows passengers to request assistance at the TSA screening checkpoint. The program was developed for passengers with disabilities, medical conditions, and other special circumstances who may need additional assistance during the security screening process.¹

- *Security Issue.* This electronic form allows passengers to play a critical role in identifying and reporting suspicious activities and threats.

The TSA Contact Center provides a receipt to any person who submits an electronic form or email to TSA as required by 49 CFR 1503.3(a).

TSA is revising the TSA Cares information collection to include the question, "Are you a veteran?" TSA is adding this question to better support veteran-related initiatives and enhance TSA's ability to track and report on the utilization of programs designed for veterans. By collecting this information, TSA aims to identify veterans who may benefit from specialized resources, services, or assistance, and ensure these programs are meeting their intended goals. Additionally, the data gathered will enable TSA to assess program effectiveness, identify areas for improvement, and fulfill reporting requirements related to veteran engagement and participation.

TSA estimates it will receive 12,304 paper customer comment card submissions, 292,943 electronic comment submissions, and 3,178 Disability and Civil Rights complaints annually.

The following provides TSA's estimates for time needed to complete these forms:

- Approximately 3 minutes to complete the comment card submission.
- Approximately 5 minutes to complete the electronic comment submission.
- Approximately 8 minutes to complete the Disability and Civil Rights complaint.

Over a 3-year period, TSA estimates there will be an average of 308,425 respondents per year, resulting in a 3-year total of 925,275 respondents. TSA estimates an average annual hour burden of 25,451 hours, for a 3-year total of 76,353 hours.

¹ The program is available to all members of the public and is separate from the Military Severely Injured Joint Support Operations Center and the Travel Protocol Office programs which support and facilitate the movement of wounded warriors, severely injured military personnel, veterans and other travelers requiring an escort through the airport security screening process.

Dated: July 30, 2026.

Christina A. Walsh,

*Paperwork Reduction Act Officer,
Information Technology, Transportation
Security Administration.*

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DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

[Docket No. FR-6191-N-07]

Section 8 Housing Choice Vouchers: Revisions to Study Enrollment, Treatment Arms and Funding Guidance for the Community Choice Demonstration

AGENCY: Office of the Assistant Secretary for Public and Indian Housing (PIH), Department of Housing and Urban Development (HUD).

ACTION: Notice.

SUMMARY: This notice provides updates to the Community Choice Demonstration (CCD), formerly known as the Housing Choice Voucher (HCV) mobility demonstration by removing the Selected Mobility-Related Services (SMRS) treatment arm, revising the study (CCD evaluation) enrollment timeline, and clarifying the recapture and reallocation of funding. This notice also discusses reallocation of Mobility Demonstration Vouchers (MDV) and guidance about the use of funds after the end of study enrollment.

DATES: Study enrollment ended on June 30, 2026. The new study enrollment end date superseded prior notices, including the Implementation Notice (85 FR 42890), which stated that PHAs would enroll families through April 30, 2027, and the Additional Implementation Guidance (89 FR 59144), which authorized extending enrollment through December 31 2027, or April 30 2028, at the discretion of the PHA to meet PHA enrollment commitments. Service delivery tracking under the CCD evaluation will end December 31, 2026; however, PHAs will continue to provide mobility-related services to families who enroll outside of the CCD evaluation through October 1, 2028, the statutory end date of the demonstration.

FOR FURTHER INFORMATION CONTACT: Ryan Jones, Director, Housing Voucher Management and Operations Division, Office of Public and Indian Housing, HUD, 451 7th Street SW, Washington, DC 20415, (202) 402-2677. HUD encourages submission of questions about the CCD to be sent to: HousingMobility@hud.gov. HUD welcomes and is prepared to receive

calls from individuals who are deaf or hard of hearing, as well as individuals with speech or communication disabilities. To learn more about how to make an accessible telephone call, please visit: <https://www.fcc.gov/consumers/guides/telecommunications-relay-service-trs>.

SUPPLEMENTARY INFORMATION:

I. Background

The CCD was authorized by section 235 of division G of the Consolidated Appropriations Act, 2019, Public Law 116–6, 133 Stat. 13, 465 (42 U.S.C. 1437f note) to provide voucher assistance and mobility-related services to families with children to encourage such families to move to lower-poverty areas, to expand access to opportunity areas, and to evaluate the effectiveness of the strategies pursued under the CCD. Additionally, the Consolidated Appropriations Act, 2019, and the Further Consolidated Appropriations Act, 2020, provided a total of \$50 million in funding for services and new vouchers and also made available \$3 million under a separate heading for a research evaluation. HUD awarded \$45.7 million to nine lead and four partner public housing agencies (PHAs), including \$35.9 million in service funding and \$9.8 million in Housing Assistance Payments (HAP) funding for MDVs. Due to several PHA withdrawals, HUD has recaptured approximately \$7.4 million in service funding and \$3 million in HAP funding. The Further Consolidated Appropriations Act, 2020 provided funding for the demonstration but did not provide any additional programmatic authority.

HUD's **Federal Register** notice published on July 15, 2020 (85 FR 42890) implemented the CCD. Subsequent notices clarified and updated the Implementation Notice, including "Implementation of the Housing Choice Voucher Mobility Demonstration, Restrictions on Participating in the Mobility Demonstration and the Moving to Work Demonstration Expansion" published on January 6, 2021 (86 FR 558), "Implementation of the Housing Choice Voucher Mobility Demonstration for Awarded PHAs, Supplementary Notice for Demonstration Participants" published on April 4, 2022 (87 FR 19522), "Announcement of Funding Awards" published on July 17, 2023 (88 FR 45458), and "Additional Implementation Guidance of the Housing Choice Voucher Mobility Demonstration for Awarded PHAs" published on July 22, 2024 (89 FR 59144).

This notice provides updates to the CCD, cancels the SMRS treatment arm, revises the study enrollment timeline, and clarifies the recapture and reallocation of funding. This notice also discusses reallocation of MDVs and guidance about the use of funds after the end of study enrollment.

II. Changes to Study Enrollment Implementation and Timeline

a. Cancellation of Selected Mobility-Related Services

HUD's original plan was to implement the CCD in two phases. Phase 1 would run for 2 years (2022 to 2024) and would implement Comprehensive Mobility-Related Services (CMRS). CMRS included a comprehensive set of services aimed to address the principal obstacles that HCV participants experience accessing lower-poverty areas, including financial barriers, knowledge and skill gaps, hesitancy on the part of families to move to opportunity areas, hesitancy on the part of property owners in opportunity areas to participate in the HCV program, and challenges that affect families' ability to stay in opportunity areas once there. Phase 2 was expected to run for 3 additional years (2025 to 2028). It would continue to implement CMRS and would add a second treatment arm of SMRS. SMRS was expected to test up to three smaller bundles of services selected from the broader CMRS suite to determine whether they could effectively assist families in accessing opportunity areas at a lower cost.

In 2024, HUD received preliminary results from the CCD evaluation that demonstrated significant benefits of CMRS.¹ An analysis of 12 months of data showed that almost 24 percent of HCV families with children who received CMRS moved to an opportunity area, compared to 4 percent of HCV families in the control group. The offer of CMRS resulted in a nearly 20 percentage point increase in the share of families moving to an opportunity area within 12 months of study enrollment. This preliminary result was encouraging and was based on a sample of about 600 families. Despite this impact and other clear benefits of the CCD, sites had only enrolled about 3,200 families between August 2022 and August 2024, which was 67 percent of the target for that point in time. Some sites struggled to reach their original enrollment projections, which led to the relatively low overall enrollment figure. Finally,

while the evaluation showed that CMRS was implemented with fidelity, HUD and the CCD sites needed to do more to improve processes, service delivery, data collection and recording. A Rapid Cycle Evaluation report detailing the early implementation of the CCD also acknowledged the significant effort across sites required to implement CMRS in the context of the CCD evaluation.

In early 2025, HUD was concerned that adding SMRS could undermine the impact of CMRS and put too much pressure on sites that were already struggling to meet enrollment targets and serve families. HUD made the decision to drop the implementation of SMRS and focus instead on improving CMRS by improving the CMRS guide and to the service delivery tool and adding staff to sites that needed it, while also offering additional training and resources.

b. Revisions to the CCD evaluation timeline

As discussed in prior notices, the CCD includes an evaluation required by section 235(g) of division G of the Consolidated Appropriations Act, 2019. The evaluation uses a randomized controlled trial at all CCD sites. Families with children who agree to participate in the CCD are randomly assigned to a treatment group that receives mobility-related services or to a control group that receives HCV standard services.

After the decision to drop SMRS in 2025, HUD and its evaluation contractor analyzed the sample size needed to answer the CCD's research questions. With only one treatment arm, the CCD would not require a sample as large as the original sample size nor enrollment as large as the original enrollment target. Monthly enrollment projections were adjusted to be more conservative and reflect the level of enrollment that sites could meet with their CMRS staffing levels. Based on these analyses, HUD decided to end study enrollment by June 30, 2026. The new study enrollment end date superseded prior notices, including the Implementation Notice which stated that PHAs would enroll families through April 30, 2027, and the Additional Implementation Guidance which authorized extending enrollment through December 31, 2027, or April 30, 2028, at the discretion of the PHA to meet PHA enrollment commitments. PHAs will provide CMRS outside of the CCD evaluation to families who sign up after June 30, 2026.

¹ See Rapid Cycle Evaluation Report <https://www.huduser.gov/portal/publications/Rapid-Cycle-Evaluation-Report.html>.

III. Post-CCD Evaluation Operations and Site Requirements

HUD will work with CCD sites to transition to post-CCD evaluation operations following the conclusion of study enrollment on June 30, 2026.

PHAs may begin signing up new families to receive CMRS outside of the CCD evaluation on or about September 1, 2026. This pause between enrolling study families and post-study families is to ensure continued fidelity to the CCD evaluation. As new families sign up to receive CMRS, HUD expects sites to reach and maintain similar sized caseloads to those observed during the CCD evaluation, with a potential ramp down period about 90 days prior to the end of the CCD for sites who will not continue their mobility programs beyond the term of the CCD. Until October 1, 2028, PHAs are strictly prohibited from providing CMRS to families who were assigned to the control group during the CCD evaluation. This will ensure the control group is not contaminated and continues to receive only standard HCV services until the end of the demonstration period.

Participation in CCD is authorized through October 1, 2028. HUD expects that all sites will continue to provide mobility-related services to families with children through October 1, 2028, or until funds have been expended.

HUD provided criteria for withdrawal in the Additional Implementation Guidance. Participating PHAs that wish to request to voluntarily withdraw from CCD prior to October 1, 2028, must submit a letter in writing, with an associated board resolution, stating the key reasons for withdrawal from CCD and a proposed plan for mitigating the impact on participating families and landlords.

Sites continuing to participate in the demonstration will be required to continue reporting through October 1, 2028. This includes final reporting in the Voucher Management System (VMS) and Inventory Management System/PIH Information Center (IMS/PIC), invoicing, and service delivery/lease outcomes in a format determined by HUD.

V. Funding and Reallocation

PHAs participating in CCD must recruit and enroll families into the study. Each CCD site is authorized to continue to use up to \$80,000 each year for staff time and expenses related to recruitment and enrollment. Since the study enrollment period has ended, PHAs will no longer conduct certain study-related activities during

enrollment, including informed consent and baseline questionnaires. However, recruitment and enrollment will still be necessary with the added requirement to monitor embargoed families during the term of the Demonstration.

PHAs currently report enrollment and CCD evaluation-related information in enrollment and service delivery tools. Once study enrollment and subsequent service delivery tracking ends, these tools will no longer be available to PHAs. Sites may propose use of their mobility related services fees for additional tools or resources in their projected budget and narrative for HUD review. HUD will reallocate approximately \$7.4 million in service funding based on demonstrated need. HUD will prioritize funding year 6 budgets (May 1, 2026–April 30, 2027). PHAs will be required to submit proposed budgets, along with a narrative, for the remainder of CCD. HUD will review proposed budgets for year 7 through the end of the CCD (May 1, 2027 through October 1, 2028), and reallocate funds based on need.

IV. Mobility Demonstration Vouchers

Each PHA participating in the demonstration has an allocation of MDVs to issue to waitlist families. MDVs are issued to families with children selected from the HCV waitlist that enroll in CCD and are randomly assigned to a treatment group that receives housing mobility-related services. Any MDVs not issued by June 30, 2026, when study enrollment ended, will be recaptured by HUD in accordance with the Implementation Notice, which requires that all MDVs be used for new admissions for the CCD treatment groups. MDVs issued prior to June 30, 2026, may still lease a unit after June 30, 2026, however if the family's MDV expires without leasing a unit, it may not be issued to a new family and HUD will recapture that MDV.²

VI. Regional Project-Based Voucher (PBV) Plan

PHAs awarded funding for a Regional PBV Plan may withdraw from this optional component of the demonstration. Requests to withdraw must be submitted to HousingMobility@hud.gov before May 1, 2027. Withdrawal is only permitted if the PHA has not yet incurred more than 60 percent of the awarded Regional PBV funds.

² If the PHA adopted a policy on voucher search terms, such as a policy on extensions of initial search term, the MDV expiration date must comply with the policy. See Implementation Notice, July 15, 2020 (85 FR 42890).

VII. Continued Housing Mobility-Related Services at CCD End

Upon October 1, 2028, statutory end date of the demonstration, HUD will work with CCD sites to process final invoices, complete reporting in VMS and IMS/PIC and service delivery/lease outcomes in the format determined by HUD. After CCD ends, sites will be allowed to use remaining mobility-related services funds to continue providing any CMRS services, as described in the Implementation Notice and subsequent notices, to any family participating in a housing mobility program at the site. HUD will provide guidance to sites on invoicing procedures for these funds. Any waivers and/or alternative requirements implemented by HUD, specific to CCD, will terminate upon the October 1, 2028, end date and the provision of services must be in accordance with normal HCV program rules.

VIII. National Environmental Policy Act

This notice provides operating instructions and procedures in connection with activities under a **Federal Register** document, 24 CFR part 982, Section 8 Tenant-Based Assistance, that has previously been subject to a required environmental review. Accordingly, under 24 CFR 50.19(c)(4), this notice is categorically excluded from environmental review under the National Environmental Policy Act of 1969 (42 U.S.C. 4321 *et seq.*).

Benjamin Hobbs,

Assistant Secretary for Public and Indian Housing.

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DEPARTMENT OF THE INTERIOR

Geological Survey

[Docket No. USGS–2026–0364; OMB Control Number 1028–0070; GX26LR000F60100]

Agency Information Collection Activities; Submission to the Office of Management and Budget (OMB) for Review and Approval; Consolidated Consumers' Report

AGENCY: U.S. Geological Survey, Interior.

ACTION: Notice of information collection; request for comment.

SUMMARY: In accordance with the Paperwork Reduction Act (PRA) of 1995 and its implementing regulations, the U.S. Geological Survey (USGS) proposes