Paperwork Reduction Act of 1995 (Public Law 104–13; 44 U.S.C. 3506(c)(2)(A)). Comments should address the accuracy of the burden estimates and ways to minimize the burden including the use of automated collection techniques or the use of other forms of information technology, as well as other relevant aspects of the information collection.

DATES: Written comments and recommendations on the proposal for the collection of information should be received by no later than July 30, 1996.

ADDRESSES: Direct all written comments to Nancy J. Kessinger, Veterans Benefits Administration (20M30), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420. All comments will become a matter of public record and will be summarized in the VBA request for Office of Management and Budget (OMB) approval. In this document the VBA is soliciting comments concerning the following information collection:

OMB Control Number: 2900–0016. Title and Form Number: Claim for Disability Insurance Benefits,VA Form 29–357.

Type of Review: Extension of a currently approved collection.

Need and Uses: The form is used by the policyholder to claim disability insurance benefits on National Service Life Insurance and United States Government Life Insurance policies.

Current Actions: The information collected on the form is used by the VBA personnel to establish the insured's eligibility for disability insurance benefits

Affected Public: Individuals or households.

Estimated Annual Burden: 14,175 hours.

Estimated Average Burden Per Respondent: 1 hour and 15 minutes. Frequency of Response: On occasion. Estimated Number of Respondents: 8.100.

FOR FURTHER INFORMATION CONTACT:

Requests for additional information or copies of the form should be directed to Department of Veterans Affairs, Attn: Jacquie McCray, Information Management Service (045A4), Department of Veterans Affairs, 810 Vermont Avenue, NW, Washington, DC 20420, telephone (202) 273–8032 or FAX (202) 273–5981.

Dated: May 14, 1996.

By direction of the Secretary.

Donald L. Neilson,

Director, Information Management Service. [FR Doc. 96–13600 Filed 5–30–96; 8:45 am] BILLING CODE 8320–01–P

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Veterans Benefits Administration, Department of Veterans Affairs

ACTION: Notice.

SUMMARY: As part of its continuing effort to reduce paperwork and respondent burden, the Veterans Benefits Administration (VBA) invites the general public and other Federal agencies to comment on this information collection. This request for comment is being made pursuant to the Paperwork Reduction Act of 1995 (Public Law 104-13; 44 U.S.C. 3506(c)(2)(A)). Comments should address the accuracy of the burden estimates and ways to minimize the burden including the use of automated collection techniques or the use of other forms of information technology, as well as other relevant aspects of the information collection.

DATES: Written comments and recommendations on the proposal for the collection of information should be received by no later than July 30, 1996. **ADDRESSES:** Direct all written comments to Nancy J. Kessinger, Veterans Benefits Administration (20M30), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420. All comments will become a matter of public record and will be summarized in the VBA request for Office of Management and Budget (OMB) approval. In this document the VBA is soliciting comments concerning the following information collection:

OMB Control Number: 2900–0099. Title and Form Number: Request for Change of Program or Place of Training—Survivors' and Dependents' Educational Assistance, VA Form 22–

Type of Review: Extension of a currently approved collection.

Need and Uses: This form is completed by a veteran's spouse, surviving spouse, or child to indicate a change in program and/or place of training. The VBA uses the information to determine if the student is eligible for dependents' educational assistance for the new program and/or place of training

Current Actions: Spouses, surviving spouses, and children who are eligible for Dependents' Educational Assistance are permitted one change of their educational program provided the new program is suitable to their aptitudes, interests, and abilities. In addition, they may change their place of training upon application to the VBA.

Affected Public: Individuals or households.

Estimated Annual Burden: 4,850 hours.

Estimated Average Burden Per Respondent: 30 minutes per application. Frequency of Response: On occasion. Estimated Number of Respondents: 9,700.

FOR FURTHER INFORMATION CONTACT:

Requests for additional information or copies of the form should be directed to Department of Veterans Affairs, Attn: Jacquie McCray, Information Management Service (045A4), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420, Telephone (202) 273–8032 or FAX (202) 273–5981.

Dated: May 14, 1996. By direction of the Secretary.

Donald L. Neilson,

Director, Information Management Service. [FR Doc. 96–13601 Filed 5–30–96; 8:45 am]

BILLING CODE 8320-01-P

Agency Information Collection Activities: Proposed Collection; Comment Request

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

SUMMARY: As part of its continuing effort to reduce paperwork and respondent burden, the Veterans Benefits Administration (VBA) invites the general public and other Federal agencies to comment on this information collection. This request for comment is being made pursuant to the Paperwork Reduction Act of 1995 (Public Law 104-13; 44 U.S.C. 3506(c)(2)(A)). Comments should address the accuracy of the burden estimates and ways to minimize the burden including the use of automated collection techniques or the use of other forms of information technology, as well as other relevant aspects of the information collection.

DATES: Written comments and recommendations on the proposal for the collection of information should be received by no later than July 30, 1996.

ADDRESSES: Direct all written comments to Nancy J. Kessinger, Veterans Benefits Administration (20M30), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420. All comments will become a matter of public record and will be summarized in the VBA request for Office of Management and Budget (OMB) approval. In this document the VBA is

soliciting comments concerning the following information collection:

OMB Control Number: 2900–0139. Title and Form Number: Notice— Payment Not Applied, VA Form 29– 4499a.

Type of Review: Extension of a currently approved collection.

Need and Uses: The form is used by veterans to reinstate their Government Life Insurance. The information collected is used by the VBA personnel to determine eligibility of the applicant for reinstatement of his/her life insurance.

Current Actions: The form is used by the policyholder to reinstate a Government Life Insurance policy. Affected Public: Individuals or

households.

Estimated Annual Burden: 300 hours. Estimated Average Burden Per Respondent: 15 minutes.

Frequency of Response: On occasion. Estimated Number of Respondents: 1,200.

FOR FURTHER INFORMATION CONTACT:

Requests for additional information or copies of the form should be directed to Department of Veterans Affairs, Attn: Jacquie McCray, Information Management Service (045A4), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420, telephone (202) 273–8032 or FAX (202) 273–5981.

Dated: May 14, 1996.
By direction of the Secretary.
Donald L. Neilson,
Director, Information Management Service.
[FR Doc. 96–13602 Filed 5–30–96; 8:45 am]
BILLING CODE 8320–01–P

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Veterans Benefits Administration, Department of Veterans Affairs.

ACTION: Notice.

SUMMARY: As part of its continuing effort to reduce paperwork and respondent burden, the Veterans Benefits Administration (VBA) invites the general public and other Federal agencies to comment on this information collection. This request for comment is being made pursuant to the Paperwork Reduction Act of 1995 (Public Law 104-13; 44 U.S.C. 3506(c)(2)(A)). Comments should address the accuracy of the burden estimates and ways to minimize the burden including the use of automated collection techniques or the use of other forms of information technology, as well as other relevant aspects of the information collection.

DATES: Written comments and recommendations on the proposal for the collection of information should be received by July 30, 1996.

ADDRESSES: Direct all written comments to Nancy J. Kessinger, Veterans Benefits Administration (20M30), Department of Veterans Affairs, 810 Vermont Avenue, NW, Washington, DC 20420. All comments will become a matter of public record and will be summarized in the VBA request for Office of Management and Budget (OMB) approval. In this document the VBA is

soliciting comments concerning the following information collection:

OMB Control Number: 2900-0539.

Title and Form Number: Application for Supplemental Service Disabled Veterans (RH) Life Insurance, VA Forms 29–0188, 29–0189, and 29–0190.

Type of Review: Revision of a currently approved collection.

Need and Uses: These forms are used by veterans to apply for Supplemental Service-Disabled Veterans Insurance. The information is used by the VBA to determine eligibility for insurance.

Current Actions: No insurance may be granted unless a completed application has been received.

Affected Public: Individuals or households.

Estimated Annual Burden: 3,333 hours.

Estimated Average Burden Per Respondent: 20 minutes..

Frequency of Response: On occasion.
Estimated Number of Respondents:
10 000

FOR FURTHER INFORMATION CONTACT:

Requests for additional information or copies of the form should be directed to Department of Veterans Affairs, Attn: Jacquie McCray, Information Management Service (045A4), 810 Vermont Avenue, NW., Washington, DC 20420, telephone (202) 273–8032 or FAX (202) 273–5981.

Dated: May 17, 1996.
William T. Morgan,
Management Analyst.
[FR Doc. 96–13603 Filed 5–30–96; 8:45 am]
BILLING CODE 8320–01–P–M