will not be accepted. To assure fairness to all petitioners regardless of their location, no hand-delivered petitions will be accepted.

If a petitioner uses a commercial carrier, the postmark date is the date affixed by the company when the petitioner deposits the petition package with the carrier. If the petitioner uses a courier service, the postmark date is the date the petitioner gives control of the package to the courier service.

Notice of Intent Does Not Satisfy Filing Deadline

In the **Federal Register** of March 24, 1999 (64 FR 14251), in which the procedures for filing a Notice of Intent to file a petition were described, it was stated that a Notice of Intent would satisfy the statutory filing deadline. However, as noted in the Interim final rule for the Ricky Ray Hemophilia Relief Fund Program, the Notice of Intent was to preserve the right to file in the event that sufficient funds were not appropriated in time to allow for a reasonable process for filing petitions within the statutory deadline. Since there is sufficient funding, the Program has established procedures to comply with the statutory deadline. Therefore, even if a petitioner filed a timely Notice of Intent, the petitioner still must file the petition by the November 13, 2001, deadline to establish eligibility for review. For individuals who filed a Notice of Intent, their place in queue for processing and payment will be determined by the date of submission of their petition, and will not be related to the date they filed their Notices of Intent or to the case numbers assigned to those Notices.

Deadline for Amended Petitions

When a person with HIV has filed a petition by the deadline of November 13, 2001, but dies before payment is made, an eligible survivor must file an amendment to the original petition in order to retain its assigned order number. When a survivor of a person with HIV has filed a petition or an amendment to a petition by the deadline of November 13, 2001, but dies before payment is made, the next-in-line eligible survivor must file an amendment. In addition, when multiple survivors file a petition by the deadline of November 13, 2001, and one of the survivors dies before payment is made, the other survivors must file an amendment.

As noted, an amendment to a petition must be filed in order to retain the assigned order number of the original petition and to receive payment. Under § 130.31(g)(3) of the Ricky Ray Program regulations, the deadline for filing an amended petition is the date of the Secretary's determination of eligibility or the date of payment, whichever is later. In other words, if the original petition is disapproved for payment, the deadline for filing an amended petition is the date that the petition was disapproved. Where the original petition is approved for payment, the deadline for filing an amended petition is before payment is made. No payments will be made after November 12, 2003 (the date on which the Program's authority ends).

Reconsideration of Petitions Disapproved for Payment

In accordance with § 130.40(a) of the Ricky Ray Program regulations, when a petition has been disapproved for payment, the petitioner has the right to request reconsideration of the denial. The petitioner has 60 days from the date of disapproval in which to file this request. If the Program's original determination to disapprove payment is affirmed upon reconsideration, and the petitioner has additional documentation to establish eligibility that was not submitted with the original petition, the petitioner has a right to file a new petition by November 13, 2001.

If a petition is disapproved for payment after November 13, 2001, the petitioner still retains the right to reconsideration and to have 60 days in which to file this request.

Dated: July 20, 2001.

Elizabeth M. Duke,

Acting Administrator.

[FR Doc. 01–18834 Filed 7–26–01; 8:45 am]

BILLING CODE 4165-15-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Heart, Lung, and Blood Institute Submission for OMB Review; Comment Request; Multi-Ethnic Study of Atherosclerosis (MESA) Event Surveillance

SUMMARY: Under the provisions of Section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the National

Heart, Lung, and Blood Institute (NHLBI), the National Institutes of Health (NIH) has submitted to the Office of Management and Budget (OMB) a request for review and approval the information collection listed below. This proposed information collection was previously published in the Federal **Register** on 4/25/01 pages 20820–20821, and allowed 60-days for public comment No public comments were received. The purpose of this notice is to allow an additional 30 days for public comment. The National Institutes of Health may not conduct or sponsor, and the respondent is not required to respond to, an information collection that has been extended, revised, or implemented on or after October 1, 1995, unless it displays a currently valid OMB control number.

Proposed Collection:

Title: Multi-Ethnic Study of Atherosclerosis (MESA) Event Surveillance. Type of Information Request: New. (OMB No. 0925-XXXX). Need and Use of Information Collection: The study, MESA, will identify and quantify factors associated with the presence and progression of subclinical cardiovascular disease (CVD)—that is, atherosclerosis and other forms of CVD that have not produced signs and symptoms. The findings will provide important information on subclinical CVD in individuals of different ethnic backgrounds and provide information for studies on new interventions to prevent CVD. The aspects of the study that concern direct participant evaluation received a clinical exemption from OMB clearance (CE-99-11-08) in April 2000. OMB clearance is being sought for the contact of physicians and participant proxies to obtain information about clinical CVD events that participants experience during the follow-up period. Frequency of Response: Once per CVD event. Affected Public: Individuals. Types of Respondents: Physicians and selected proxies of individuals recruited for MESA. The annual reporting burden is as follows: Estimated Number of Respondents: 555; Estimated Number of Responses per Respondent: 1.0; and Estimated Total Annual Burden Hours Requested: 42. The annualized cost to respondents is estimated at \$6,733. There are no capital, operating, or maintenance costs to report.

Type of respondents	Estimated number of respondents	Estimated number of responses per respondent	Average burden hours per response	Estimated total annual burden hours requested
Physicians	279 276	1.0 1.0	0.20 0.25	19 23
Total	555	1.0	0.225	42

Request for Comments

Written comments and/or suggestions from the public and affected agencies are invited on one or more of the following points: (1) Whether the proposed collection of information will have practical utility; (2) The accuracy of the agency's estimate of 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) Way to minimize the burden of collection of information on those who are to respond, including the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology.

Direct Comments to OMB

Written comments and/or suggestions regarding the item(s) contained in this notice, especially regarding the estimated public burden and associated response time, should be directed to the: Office of Management and Budget, Office of Regulatory Affairs, New Executive Office Building, Room 10235, Washington, DC 20503, Attention: Desk Officer for NIH. To request more information on the proposed project or to obtain a copy of the data collection plans and instruments, contact Dr. Diane Bild, Project Officer, NIH, NHLBI, Division of Epidemiology and Clinical Applications, 6701 Rockledge Drive, MSC 7934, Bethesda, MD 20892, or call non-toll-free number (301) 435-0707 or E-mail your request, including your address to: bd3@nih.gov.

Comments Due Date

Comments regarding this information are best assured of having their full effect if received on or before August 27, 2001.

Dated: July 17, 2001.

Peter J. Savage,

Acting Director, Division of Epidemiology and Clinical Applications.

[FR Doc. 01-18729 Filed 7-26-01; 8:45 am]

BILLING CODE 4140-01-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Arthritis and Musculoskeletal and Skin Diseases; Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the following meeting.

The meeting will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Institute of Arthritis and Musculoskeletal and Skin Diseases Special Emphasis Panel.

Date: August 15, 2001. Time: 8:30 AM to 5:00 PM.

Agenda: To review and evaluate grant applications.

Place: Double Tree Hotel, 1750 Rockville Pike, Rockville, MD 20852.

Contact Person: John R. Lymangrover, Scientific Review Administrator, National Institutes of Health, NIAMS, Natcher Bldg., Room 5As25N, Bethesda, MD 20892, 301– 594–4952.

(Catalogue of Federal Domestic Assistance Program Nos. 93.846, Arthritis, Musculoskeletal and Skin Diseases Research, National Institutes of Health, HHS)

Dated: July 19, 2001.

LaVerne Y. Stringfield,

Director, Office of Federal Advisory Committee Policy.

[FR Doc. 01–18709 Filed 7–26–01; 8:45 am]

BILLING CODE 4140-01-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Neurological Disorders and Stroke; Notice of Closed Meetings

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the following meetings.

The meetings will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Institute of Neurological Disorders and Stroke Special Emphasis Panel.

Date: August 8, 2001.

Time: 9:30 a.m. to 11:30 p.m.

Agenda: To review and evaluate grant applications.

Place: 6001 Executive Blvd., Bethesda, MD 20892, (Telephone Conference Call).

Contact Person: Alan L. Willard, PhD, Scientific Review Administrator, Scientific Review Branch, NINDS/NIS/DHHS, Neuroscience Center, 6001 Executive Blvd, suite 3208, MSC 9529, Bethesda, MD 20892– 9529, 301–496–9223.

Name of Committee: National Institute of Neurological Disorders and Stroke Special Emphasis Panel.

Date: August 21, 2001.

Time: 8:30 a.m. to 4:30 p.m.

Agenda: To review and evaluate grant applications.

Place: The Mayflower Hotel, 1127 Connecticut Ave, Washington DC 20036.

Contact Person: Paul A. Sheehy, Scientific Review Administrator, Scientific Review Branch, NINDS/NIH/DHHS, Neuroscience Center, 6001 Executive Blvd, suite 3208, MSC 9529, Bethesda, MD 20892–9529, 301–496–9223.

(Catalogue of Federal Domestic Assistance Program Nos. 93.853, Clinical Research Related to Neurological Disorders; 93.854, Biological Basis Research in the