

Pamela Fenderson, Program Analyst,
Office of Business Development, Small
Business Administration, 409 3rd Street
SW., Suite 8300, Washington, DC 20416.

FOR FURTHER INFORMATION CONTACT:

Pamela Fenderson, Program Analyst,
Office of Business Development, 202–
205–7408 pamela.fenderson@sba.gov
Curtis B. Rich, Management Analyst,
202–205–7030 curtis.rich@sba.gov.

SUPPLEMENTARY INFORMATION:

Title: “8(a) Annual Update”.
Description of Respondents: 8(a)
Program Participants.
Form No’s: 1450.
Annual Responses: 6,700.
Annual Burden: 7,258.

Jacqueline White,

Chief, Administrative Information Branch.
[FR Doc. E7–15183 Filed 8–3–07; 8:45 am]

BILLING CODE 8025–01–P

SMALL BUSINESS ADMINISTRATION

[Disaster Declaration #10927 and #10928]

Oklahoma Disaster Number OK–00012

AGENCY: U.S. Small Business
Administration.

ACTION: Amendment 2.

SUMMARY: This is an amendment of the
Presidential declaration of a major
disaster for the State of Oklahoma
(FEMA–1712–DR), dated 07/07/2007.

Incident: Severe Storms, Flooding,
and Tornadoes.

Incident Period: 06/10/2007 and
continuing through 07/25/2007.

Effective Date: 07/25/2007.

*Physical Loan Application Deadline
Date:* 09/05/2007.

EIDL Loan Application Deadline Date:
04/07/2008.

ADDRESSES: Submit completed loan
applications to: U.S. Small Business
Administration, Processing and
Disbursement Center, 14925 Kingsport
Road, Fort Worth, TX 76155.

FOR FURTHER INFORMATION CONTACT: A.
Escobar, Office of Disaster Assistance,
U.S. Small Business Administration,
409 3rd Street, SW., Suite 6050,
Washington, DC 20416.

SUPPLEMENTARY INFORMATION: The notice
of the President’s major disaster
declaration for the State of Oklahoma,
dated 07/07/2007 is hereby amended to
establish the incident period for this
disaster as beginning 06/10/2007 and
continuing through 07/25/2007.

All other information in the original
declaration remains unchanged.

(Catalog of Federal Domestic Assistance
Numbers 59002 and 59008)

Herbert L. Mitchell,

*Associate Administrator for Disaster
Assistance.*

[FR Doc. E7–15184 Filed 8–3–07; 8:45 am]

BILLING CODE 8025–01–P

SMALL BUSINESS ADMINISTRATION

**Disaster Declaration #10958 and
#0959; Wisconsin Disaster #WI–00009**

AGENCY: U.S. Small Business
Administration.

ACTION: Notice.

SUMMARY: This is a notice of an
Administrative declaration of a disaster
for the State of Wisconsin dated July 30,
2007.

Incident: Severe storms and flooding.

Incident Period: July 18, 2007.

Effective Date: July 30, 2007.

*Physical Loan Application Deadline
Date:* September 28, 2007.

*Economic Injury (EIDL) Loan
Application Deadline Date:* April 30,
2008.

ADDRESSES: Submit completed loan
applications to: U.S. Small Business
Administration, Processing and
Disbursement Center, 14925 Kingsport
Road, Fort Worth, TX 76155.

FOR FURTHER INFORMATION CONTACT: A.
Escobar, Office of Disaster Assistance,
U.S. Small Business Administration,
409 3rd Street, SW., Suite 6050,
Washington, DC 20416.

SUPPLEMENTARY INFORMATION: Notice is
hereby given that as a result of the
Administrator’s disaster declaration,
applications for disaster loans may be
filed at the address listed above or other
locally announced locations.

The following areas have been
determined to be adversely affected by
the disaster:

Primary Counties:

Grant

Contiguous Counties: Wisconsin

Crawford, Iowa, Lafayette, Richland
Iowa

Clayton, Dubuque.

Illinois

Jo Daviess

The Interest Rates are:

	Percent
Homeowners With Credit Avail- able Elsewhere	5.750
Homeowners Without Credit Available Elsewhere	2.875
Businesses With Credit Available Elsewhere	8.000
Businesses & Small Agricultural Cooperatives Without Credit Available Elsewhere	4.000

	Percent
Other (Including Non-Profit Orga- nizations) With Credit Available Elsewhere	5.250
Businesses And Non-Profit Orga- nizations Without Credit Avail- able Elsewhere	4.000

The number assigned to this disaster
for physical damage is 10958 6 and for
economic injury is 10959 0.

The States which received an EIDL
Declaration # are Wisconsin, Illinois,
and Iowa.

(Catalog of Federal Domestic Assistance
Numbers 59002 and 59008)

Dated: July 30, 2007.

Steven C. Preston,

Administrator.

[FR Doc. E7–15185 Filed 8–3–07; 8:45 am]

BILLING CODE 8025–01–P

SOCIAL SECURITY ADMINISTRATION

**Agency Information Collection
Activities: Proposed Request and
Comment Request**

The Social Security Administration
(SSA) publishes a list of information
collection packages that will require
clearance by the Office of Management
and Budget (OMB) in compliance with
Public Law 104–13, the Paperwork
Reduction Act of 1995, effective October
1, 1995. The information collection
packages that may be included in this
notice are for new information
collections, approval of existing
information collections, revisions to
OMB-approved information collections,
and extensions (no change) of OMB-
approved information collections.

SSA is soliciting comments on the
accuracy of the agency’s burden
estimate; the need for the information;
its practical utility; ways to enhance its
quality, utility, and clarity; and on ways
to minimize burden on respondents,
including the use of automated
collection techniques or other forms of
information technology. Written
comments and recommendations
regarding the information collection(s)
should be submitted to the OMB Desk
Officer and the SSA Reports Clearance
Officer. The information can be mailed,
faxed or emailed to the individuals at
the addresses and fax numbers listed
below:

(OMB), Office of Management and
Budget, Attn: Desk Officer for SSA, Fax:
202–395–6974, E-mail address:

OIRA_Submission@omb.eop.gov.

(SSA), Social Security
Administration, DCBPM, Attn: Reports
Clearance Officer, 1333 Annex Building,

6401 Security Blvd., Baltimore, MD 21235, Fax: 410-965-6400, E-mail address: OPLM.RCO@ssa.gov.

I. The information collections listed below are pending at SSA and will be submitted to OMB within 60 days from the date of this notice. Therefore, your comments should be submitted to SSA within 60 days from the date of this publication. You can obtain copies of the collection instruments by calling the SSA Reports Clearance Officer at 410-965-0454 or by writing to the address listed above.

1. Travel Expense Reimbursement—20 CFR 404.999(d) and 416.1499—0960-0434. The Social Security Act provides for travel expense reimbursement by the State agency or Federal agency for claimant travel incidental to medical examinations and to parties, their representatives, and all reasonably necessary witnesses. Reimbursement is applicable to travel exceeding 75 miles to attend medical examinations, reconsideration interviews and proceedings before an administrative law judge. Reimbursement procedures require the claimant to provide (1) A list of expenses incurred, and (2) receipts of such expense. State and Federal personnel review the listings and receipts to verify the amount to be reimbursed to the claimant. The respondents are claimants for Title II benefits and Title XVI payments.

Type of Request: Extension of an OMB-approved information collection.

Number of Respondents: 50,000.

Frequency of Response: 1.

Average Burden per Response: 10 minutes.

Estimated Annual Burden: 8,333 hours.

2. Disability Hearing Officer's Report of Disability Hearing—20 CFR 404.917, 416.1407, 416.1417—0960-0440. Form SSA-1205-BK is used by the Disability Hearing Officer conducting the disability interview in preparation for a written reconsidered determination—specifically for evaluating Title II and Title XVI adult disability claims. The form provides the framework for addressing crucial elements in the case and is used in formulating the completed official document of the decision. Respondents are Disability Hearing Officers.

Type of Request: Extension of an OMB-approved information collection.

Number of Respondents: 35,600.

Frequency of Response: 1.

Average Burden per Response: 60 minutes.

Estimated Annual Burden: 35,600 hours.

3. Beneficiary Recontact Report—20 CFR 404.703 and 404.705—0960-0536. SSA needs to ensure that eligibility for benefits continues after entitlement is established. Studies show that payees of children who marry fail to report the marriage, which is a terminating event. SSA asks children ages 15, 16, and 17 information about marital status to detect overpayments and avoid continuing payment to those no longer entitled. Form SSA-1587-OCR-SM is used to obtain information regarding marital status from those children who have representative payees. Respondents are recipients of survivor mother/father Social Security benefits who have representative payees.

Type of Request: Revision of an OMB-approved information collection.

Number of Respondents: 982,357.

Frequency of Response: 1.

Average Burden Per Response: 3 minutes.

Estimated Annual Burden: 49,118 hours.

4. Certificate of Coverage Request—20 CFR 404.1913—0960-0554. The United States has Social Security agreements with 21 countries. These agreements eliminate double Social Security coverage and taxation where, except for the provisions of the agreement, a period of work would be subject to coverage and taxes in both countries. The individual agreements contain rules for determining the country under whose laws the period of work will be covered and to whose system taxes will be paid. The agreements further provide that, upon the request of the worker or employer, the country under whose system the period of work is covered will issue a certificate of coverage. The certificate serves as proof of exemption from coverage and taxation under the system of the other country. The information collected is needed to determine if a period of work is covered by the U.S. Social Security system under an agreement and to issue a U.S. certificate of coverage. Respondents are workers and employers wishing to establish exemption from foreign social security taxes.

Type of Request: Extension of an OMB-approved information collection.

Number of Respondents: 50,000.

Estimated Annual Burden: 25,000 hours.

Type of respondent	Number of respondents	Frequency of response	Average burden per response (minutes)	Total annual burden (hours)
Individuals	30,000	1	30	15,000
Private Sector	20,000	1	30	10,000
Totals	50,000	25,000

5. Race & Ethnicity Qualitative Research—0960-NEW.

Collection Background

Currently, the Social Security Administration (SSA) does not have a reliable, statistically valid means of capturing race/ethnicity data in our core business processes. While race/ethnicity data is collected on the Form SS-5, Application for Social Security Card, it is not provided to SSA through other means of enumerating individuals; e.g., the Enumeration at Birth and

Enumeration at Entry processes. Consequently, we intend to collect this information in other SSA application processes.

The Office of Management and Budget (OMB) mandated that Federal agencies collecting race and ethnicity information must use consistent standards established by OMB. Adding race/ethnicity as questions to SSA's applications for benefits will enable SSA to improve its administrative data.

Race & Ethnicity Qualitative Research

Before SSA collects race/ethnicity data, we plan to conduct several voluntary focus groups with members of the public to assess their opinions, reactions and recommendations on a proposed form that will be used to collect the information. The questions and race and ethnicity categories will follow the standards developed by OMB. The information from this research will be used to develop a comprehensive collection form. The respondents are members of the public

who volunteer to participate in the RECS questions focus groups.

Type of Request: New information collection.

Number of Respondents: 96 (8 focus groups, 12 participants).

Frequency of Response: 1.

Average Burden per Response: 90 minutes.

Estimated Annual Burden: 144 hours.

II. The information collections listed below have been submitted to OMB for clearance. Your comments on the information collections would be most useful if received by OMB and SSA within 30 days from the date of this publication. You can obtain a copy of the OMB clearance packages by calling the SSA Reports Clearance Officer at 410-965-0454, or by writing to the address listed above.

1. Child Care Dropout Questionnaire—20 CFR 404.211(e)(4)—0960-0474. Information collected on this form is used by SSA to determine if an individual qualifies for a child care exclusion in computing the individual's disability benefit amount. Respondents are applicants for disability benefits.

Type of Request: Extension of an OMB-approved information collection.

Number of Respondents: 2000.

Frequency of Response: 1.

Average Burden per Response: 5 minutes.

Estimated Annual Burden: 167 hours.

Dated: July 30, 2007.

Elizabeth A. Davidson,

Reports Clearance Officer, Social Security Administration.

[FR Doc. E7-15152 Filed 8-3-07; 8:45 am]

BILLING CODE 4191-02-P

DEPARTMENT OF STATE

[Public Notice 5875]

Determination on U.S. Position on Proposed European Bank for Reconstruction and Development (EBRD) Projects in Serbia and Bosnia and Herzegovina

Pursuant to section 561 of the Foreign Operations, Export Financing, and Related Programs Appropriations Act, 2006 (Pub. L. 109-102) (FOAA), and Department of State Delegation of Authority Number 289, I hereby determine that the two proposed EBRD projects, one to provide 25.1 million euro equity investment and a 27.5 million euro loan for tourism facility development in the region and one to provide a 35 million euro equity investment for expanded pension fund management in the region, will contribute to a stronger and more integrated economy in Serbia and Bosnia and Herzegovina and directly support implementation of the Dayton Accords. I therefore waive the application of Section 561 of the FOAA to the extent that provision would otherwise prevent the U.S. Executive Directors of the EBRD from voting in favor of these projects.

This Determination shall be reported to the Congress and published in the **Federal Register**.

Dated: February 13, 2007.

Daniel Frie,

Assistant Secretary of State for European and Eurasian Affairs Department of State.

[FR Doc. E7-15241 Filed 8-3-07; 8:45 am]

BILLING CODE 4710-23-P

DEPARTMENT OF TRANSPORTATION

Office of the Secretary

[Docket OST-2006-25711; Order 2007-7-24]

Application of Maine Aviation Aircraft Charter, LLC. for Commuter Air Carrier Authority

AGENCY: Department of Transportation.

ACTION: Notice of Order to Show Cause.

SUMMARY: The Department of Transportation is directing all interested persons to show cause why it should not issue an order finding Maine Aviation Aircraft Charter, LLC., fit, willing, and able, and awarding it commuter air carrier authority to conduct scheduled passenger and cargo commuter service.

DATES: Persons wishing to file objections should do so no later than August 14, 2007.

ADDRESSES: Objections and answers to objections should be filed in Docket OST-2006-25711 and addressed to Docket Operations, (M-30, Room W12-140), U.S. Department of Transportation, 1200 New Jersey Avenue, SE., Washington, DC 20590, and should be served upon the parties listed in Attachment A to the order.

FOR FURTHER INFORMATION CONTACT: Richard Pittaway, Air Carrier Fitness Division (X-56, Room W86-461), U.S. Department of Transportation, 1200 New Jersey Avenue, SE., Washington, DC 20590, (202) 366-8856.

Dated: July 31, 2007.

Andrew B. Steinberg,

Assistant Secretary for Aviation and International Affairs.

[FR Doc. E7-15219 Filed 8-3-07; 8:45 am]

BILLING CODE 4910-9X-P