clarity of the information to be collected; and (d) ways to minimize the burden of the information collection on respondents, including through the use of automated collection techniques or other forms of information technology. All comments will become a matter of public record.

Dated at Washington, DC, this 26th day of June 2012.

Federal Deposit Insurance Corporation.

Robert E. Feldman,

Executive Secretary.

[FR Doc. 2012–16030 Filed 6–29–12; 8:45 am]

BILLING CODE 6714–01–P

FEDERAL RESERVE SYSTEM

Change in Bank Control Notices; Acquisitions of Shares of a Bank or Bank Holding Company

The notificants listed below have applied under the Change in Bank Control Act (12 U.S.C. 1817(j)) and § 225.41 of the Board's Regulation Y (12 CFR 225.41) to acquire shares of a bank or bank holding company. The factors that are considered in acting on the notices are set forth in paragraph 7 of the Act (12 U.S.C. 1817(j)(7)).

The notices are available for immediate inspection at the Federal Reserve Bank indicated. The notices also will be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing to the Reserve Bank indicated for that notice or to the offices of the Board of Governors. Comments must be received not later than July 17, 2012.

A. Federal Reserve Bank of Chicago (Colette A. Fried, Assistant Vice President) 230 South LaSalle Street, Chicago, Illinois 60690–1414:

1. *Sidney J. Lee, as an individual, and together with Medora Lee, both of Chicago, Illinois, and Serena Lee,* Greenwich, Connecticut; as a group acting in concert to acquire control of American Metro Bancorp, Inc., and thereby indirectly acquire control of American Metro Bank, both in Chicago, Illinois.

Board of Governors of the Federal Reserve System, June 27, 2012.

Robert deV. Frierson,

Deputy Secretary of the Board.

[FR Doc. 2012–16122 Filed 6–29–12; 8:45 am]

BILLING CODE 6210–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Office for State, Tribal, Local and Territorial Support (OSTLTS); Meeting

In accordance with Presidential Executive Order No. 13175, November 6, 2000, and the Presidential Memorandum of November 5, 2009 and September 23, 2004, Consultation and Coordination with Indian Tribal Governments, CDC and the Agency for Toxic Substances and Disease Registry (ATSDR) announces the following meeting and Tribal Consultation Session:

Name: Tribal Advisory Committee (TAC) Meeting and 9th Biannual Tribal Consultation Session.

Times and Dates:

8:00 a.m.–5:00 p.m., August 28 and 29, 2012 (TAC Meeting);

8:00 a.m.–4:00 p.m., August 30, 2012 (9th Biannual Tribal Consultation Session).

Place: The TAC Meeting will be held at the Mohegan Sun, 1 Mohegan Sun Boulevard, Uncasville, Connecticut 06382.

Status: The meetings are being hosted by CDC/ATSDR and the Mohegan Tribe and are open to the public.

Purpose: The purpose of the Biannual Tribal Consultation is for CDC/ATSDR leadership and staff to conduct government-to-government consultation with elected tribal officials or their designated representatives and confer with American Indian/Alaska Native (AI/AN) community-based organizations and AI/AN urban and rural communities on issues that affect them. This exchange of information is meant to increase mutual understanding and increase effective collaboration and informed decision making. The purpose of the CDC/ATSDR Tribal Advisory Committee or TAC is to provide a complementary venue wherein tribal representatives and CDC/ATSDR leadership and staff exchange information about public health issues in Indian Country, identify urgent public health needs in AI/AN communities, and discuss collaborative approaches to addressing these issues and needs.

Matters To Be Discussed: The following topics are scheduled for presentation and discussion during the TAC Meeting; however, discussion is not limited to these topics: Social determinants of health, cancer control and prevention, the Strategic National Stockpile (strategically placed medicine and supplies for use in national emergencies) and opportunities at CDC/ATSDR for Native participation.

Topics that will be discussed during the Tribal Consultation include the following: Controlled Substance Abuse, Tobacco Control Efforts, and Motor Vehicle Safety.

Additional opportunities will be provided during the Consultation Session for tribal testimony. Tribal Leaders are encouraged to submit written testimony by 12:00 a.m., EST on August 22, 2012, to Kimberly Cantrell, Deputy Associate Director for Tribal Support, OSTLTS, CDC, via mail to 1600 Clifton Road NE., MS K–70, Atlanta, Georgia 30329, or email to *klw6@cdc.gov*. Depending on the time available, it may be necessary to limit the time of each presenter.

The agenda is subject to change as priorities dictate.

Information about the two upcoming meetings, past meetings, and CDC/ATSDR's policies related to these meetings, are available at *http://www.cdc.gov/stltpublichealth/TribalSupport/announcements.html*.

Contact Person for More Information: Kimberly Cantrell, Deputy Associate Director for Tribal Support, OSTLTS, CDC, via mail to 1600 Clifton Road NE., MS K–70, Atlanta, Georgia 30329, or email to *klw6@cdc.gov*. The Director, Management Analysis and Services Office has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities, for both the Centers for Disease Control and Prevention, and the Agency for Toxic Substances and Disease Registry.

Dated: June 22, 2012.

Elaine L. Baker,

Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

[FR Doc. 2012–16097 Filed 6–29–12; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Proposed Information Collection Activity; Comment Request

Proposed Projects:

Title: National Medical Support Notice—NPRM.

OMB No.: 0970–0222.

Description: The National Medical Support Notice (NMSN) is a two-part document to be completed by state child support enforcement agencies, employers, and health plan administrators to assist in enforcing health care coverage provisions in a child support order. The Department of Health and Human Services (HHS) developed and maintains Part A of the NMSN, which is sent to an obligor's employer for completion; the Department of Labor (DOL) developed and maintains Part B of the NMSN, which is provided to health care administrators following completion of Part A.

DOL revised Part B to conform with changes to the currently approved Part A and is seeking a three year approval from the Office of Management and Budget (OMB). To avoid burdening the

state child support enforcement agencies with potential reprogramming at varying times due to future changes in either Part A or Part B, the Administration for Children and Families is resubmitting an unchanged information collection package and requesting an extension to the current OMB approval of NMSN Part A to synchronize with the expiration date of NMSN Part B.

Respondents: State child support enforcement agencies, employers, and health plan administrators.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
National Medical Support Notice	54	97,775	0.17	897,574.50

Estimated Total Annual Burden Hours: 897,574.50.

In compliance with the requirements of Section 506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Administration for Children and Families is soliciting public comment on the specific aspects of the information collection described above. Copies of the proposed collection of information can be obtained and comments may be forwarded by writing to the Administration for Children and Families, Office of Planning, Research and Evaluation, 370 L'Enfant Promenade SW., Washington, DC 20447, Attn: ACF Reports Clearance Officer. Email address: *infocollection@acf.hhs.gov*. All requests should be identified by the title of the information collection.

The Department specifically requests comments on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology.

Consideration will be given to comments and suggestions submitted within 60 days of this publication.

Robert Sargis,

Reports Clearance Officer.

[FR Doc. 2012–16029 Filed 6–29–12; 8:45 am]

BILLING CODE 4184–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. FDA–2012–N–0063]

Sami Arshak Yanikian: Debarment Order

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is issuing an order under the Federal Food, Drug, and Cosmetic Act (the FD&C Act) debarring Sami Arshak Yanikian for 10 years from providing services in any capacity to a person that has an approved or pending drug product application. FDA bases this order on a finding that Mr. Yanikian was convicted of two counts of introducing unapproved new drugs into interstate commerce, which relates to the development or approval, including the process for development or approval, of drug products and to the regulation of drug products under the FD&C Act. In addition, the type of conduct that served as the basis for Mr. Yanikian's convictions undermine the process for the regulation of drugs. Mr. Yanikian was given notice of the proposed debarment and an opportunity to request a hearing within the timeframe prescribed by regulation. Mr. Yanikian failed to respond. Mr. Yanikian's failure to respond constitutes a waiver of his right to a hearing concerning this action.

DATES: This order is effective July 2, 2012.

ADDRESSES: Submit applications for termination of debarment to the Division of Dockets Management (HFA–305), Food and Drug Administration, 5630 Fishers Lane, Rm. 1061, Rockville, MD 20852.

FOR FURTHER INFORMATION CONTACT: Kenny Shade, Office of Regulatory Affairs, Food and Drug Administration, 12420 Parklawn Dr., Rockville, MD 20857, 301–796–4640.

SUPPLEMENTARY INFORMATION:

I. Background

Section 306(b)(2)(B)(i)(I) of the FD&C Act (21 U.S.C. 335a(b)(2)(B)(i)(I)) permits FDA to debar an individual if it finds that the individual has been convicted of a misdemeanor under Federal law for conduct relating to the development or approval, including the process for development or approval, of any drug product or otherwise relating to the regulation of drug products under the FD&C Act, and if FDA finds that the type of conduct that served as the basis for the conviction undermines the process for the regulation of drugs.

On June 29, 2011, Mr. Yanikian was found guilty of two counts of introduction of an unapproved drug in interstate commerce, in violation of sections 301(d), 505(a), and 303(a)(1) of the FD&C Act (21 U.S.C. 331(d), 355(a), 333(a)(1)) and of aiding and abetting, in violation of 18 U.S.C. 2(b), and the U.S. District Court for the Central District of California entered judgment against Mr. Yanikian for the misdemeanor offenses of introduction of an unapproved drug in interstate commerce and aiding and abetting.

The FDA's finding that debarment is appropriate is based on the misdemeanor convictions referenced herein. The factual basis for the conviction is as follows: On March 17, 2005, FDA sent Mr. Yanikian a warning letter regarding his marketing and sale of Novel natural formulation for atrial fibrillation, Super Nasal Drops, and Sams No Tinnitus Formulation. The warning letter described the claims Mr. Yanikian's Web site was making pertaining to these products and informed him that his claims caused the products to be ''drugs'' as defined by the FD&C Act because they were intended to cure, mitigate, treat, or prevent disease. Mr. Yanikian was informed that his products were ''new drugs'' and that a new drug could not be introduced or delivered for introduction into interstate commerce unless an FDA-approved application was in effect for it. The