Type of respondent	Form No. & name	Number of respondents	Number of responses per respondent	Average burden per response (hours)	Total burden (hours)
Medical/Clinical Laboratory Tech- nologist.	57.318 Hemovigilance Adverse Reaction—Transfusion Associated	500	2	20/60	333
Medical/Clinical Laboratory Tech- nologist.	Circulatory Overload. 57.319 Hemovigilance Adverse Reaction—Unknown Transfusion	500	1	20/60	167
Medical/Clinical Laboratory Tech- nologist.	Reaction. 57.320 Hemovigilance Adverse Reaction—Other Transfusion Re- action.	500	1	20/60	167
Medical/Clinical Laboratory Tech- nologist.	57.400 Outpatient Procedure Com- ponent—Annual Facility Survey.	5,000	1	5/60	417
Staff RN	57.401 Outpatient Procedure Component—Monthly Reporting Plan.	5,000	12	15/60	15,000
Staff RN	57.402—Outpatient Procedure Com- ponent Same Day Outcome Measures & Prophylactic Intra- venous(IV) Antibiotic Timing Event.	5,000	25	40/60	83,333
Staff RN	57.403—Outpatient Procedure Com- ponent—Monthly Denominators for Same Day Outcome Measures & Prophylactic Intravenous(IV) Antibiotic Timing Event.	5,000	12	40/60	40,000
Staff RN	57.404 Outpatient Procedure Com- ponent—Annual Facility Survey.	5,000	540	10/60	450,00
Registered Nurse (Infection Preventionist).	57.405 Outpatient Procedure Com- ponent—Surgical Site (SSI) Event.	5,000	36	35/60	105,00
Staff RN	57.500 Outpatient Dialysis Center Practices Survey.	7,000	1	2.0	14,000
Registered Nurse (Infection Preventionist).	57.501 Dialysis Monthly Reporting Plan.	7,000	12	5/60	7,000
Staff RN	57.502 Dialysis Event 57.503 Denominator for Outpatient Dialysis.	7,000 7,000	60 12	25/60 10/60	175,000 14,000
Staff RN	57.504 Prevention Process Meas- ures Monthly Monitoring for Dialy-	2,000	12	1.25	30,000
Staff RN	sis. 57.505 Dialysis Patient Influenza Vaccination.	325	75	10/60	4,063
Staff RN	57.506 Dialysis Patient Influenza Vaccination Denominator.	325	5	10/60	271
Staff RN	57.507 Home Dialysis Center Practices Survey.	350	1	30/60	175
Total					5922,953

## ESTIMATED ANNUALIZED BURDEN HOURS—Continued

#### Leroy A. Richardson,

Chief, Information Collection Review Office, Office of Scientific Integrity, Office of the Associate Director for Science, Office of the Director, Centers for Disease Control and Prevention.

[FR Doc. 2017–11020 Filed 5–26–17; 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: Form ACF-196R, "TANF Quarterly Financial Report." OMB No.: 0970-0446. Description: This information collection is authorized under Section 411(a)(3) of the Social Security Act. This request is for continued approval of Form ACF-196R for quarterly financial reporting under the Temporary Assistance for Needy Families (TANF) program. States participating in the TANF program are required by statute to report financial data on a quarterly basis. The forms meet the legal standard and provide essential data on the use of federal TANF funds. Failure to collect the data would seriously compromise ACF's ability to monitor program expenditures, estimate funding needs, and to prepare budget submissions and annual reports required by Congress. Financial reporting under the TANF program is governed by 45 CFR part 265.

*Respondents:* State agencies administering the TANF program.

## ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
ACF-196R	51	4	14	2,856

#### *Estimated Total Annual Burden Hours:* 2,856.

In compliance with the requirements of the Paperwork Reduction Act of 1995 (Pub. L. 104–13, 44 U.S.C. Chap 35), 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, 330 C Street SW., Washington, DC 20201. 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 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. 2017–10990 Filed 5–26–17; 8:45 am] BILLING CODE 4184–01–P

### DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Administration for Children and Families

### Proposed Information Collection Activity; Comment Request

### **Proposed Projects**

*Title:* DRA TANF Final Rule. *OMB No.:* 0970–0338.

# ANNUAL BURDEN ESTIMATES

Description: When the Deficit Reduction Act of 2005 (DRA) reauthorized the Temporary Assistance for Needy Families (TANF) program, it imposed a new data requirement that States prepare and submit data verification procedures and replaced other data requirements with new versions including: the TANF Data Report, the SSP-MOE Data Report, the **Caseload Reduction Documentation** Process, and the Reasonable Cause/ **Corrective Compliance Documentation** Process. The FY2017 Consolidated Appropriations Act (H.R. 244) provides federal funds to operate Temporary Assistance for Needy Families (TANF) programs in the states, DC, Guam, Puerto Rico, the U.S. Virgin Islands, and for approved federally recognized tribes and Alaskan Native Villages through FY2018. We are proposing to continue these information collections without change.

*Respondents:* The 50 States of the United States, the District of Columbia, Guam, Puerto Rico, and the Virgin Islands.

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Preparation and Submission of Data Verification Procedures §§ 261.60– 261.63 Caseload Reduction Documentation Process, ACF-202 §§ 261.41 & 261.44 Reasonable Cause/Corrective Compliance Documentation Process	54 54	1 1	640 120	34,560 6,480
§§ 262.4, 262.6, & 262.7; § 261.51 TANF Data Report Part 265 SSP-MOE Data Report Part 265	54 54 29	2 4 4	240 2,201 714	25,920 475,416 82,824

## *Estimated Total Annual Burden Hours:* 625,200.

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, 330 C Street SW., Washington, DC 20201, Attn: ACF Reports Clearance Officer. Email address: *infocollection@acf.hhs.gov*. All requests should be identified by the title of the information collection.

## **OMB** Comment

OMB is required to make a decision concerning the collection of information between 30 and 60 days after publication of this document in the **Federal Register**. Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication. Written comments and recommendations for the proposed information collection should be sent directly to the following: Office of Management and Budget, Paperwork Reduction Project, *Email: OIRA\_ SUBMISSION@OMB.EOP.GOV*, Attn: Desk Officer for the Administration for Children and Families.

#### **Robert Sargis**,

Reports Clearance Officer. [FR Doc. 2017–11007 Filed 5–26–17; 8:45 am] BILLING CODE P

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