

Street, Boise, ID 83705. Officers: Bryan Treadwell, Manager, (Qualifying Individual), Summer Treadwell, Member.

Cayman Consolidators, Inc., 74 NW 25th Avenue, Miami, FL 33125. Officer: Alberto Diaz Rodriguez, President/Sec./Treasurer, (Qualifying Individual).

Lozada Corporation dba Lozada Transportation Services, 6526 Arlington Boulevard, Falls Church, VA 22042. Officers: Cristian K. Montecinos, Secretary, (Qualifying Individual), Cesar Montecinos, President/Treasurer.

Trips Logistics Corp, 6 Morgan Drive, Methuen, MA 01844. Officer: Amale S. Najjar, President/Treasurer/Secretary, (Qualifying Individual).

Global Container Line, Inc. dba Global Container Line, 1930 6th Avenue South, #401, Seattle, WA 98134. Officers: Sarah Dorscht, Senior Vice President, (Qualifying Individual), Jason Totah, President/CEO.

Barthco International, Inc. dba OHL-International, 5101 S. Broad Street, Philadelphia, PA 19112. Officers: Alberto B. Benki, Senior Vice President, (Qualifying Individual), Scott McWilliams, CEO.

Mallory Alexander International Logistics, LLC, dba TradeSource, 1 Cordes Street Charleston, SC 29401. Officers: W. Neely Mallory, III, President, (Qualifying Individual), W. Neely Mallory, Jr., CEO.

Ocean Freight Forwarder—Ocean Transportation Intermediary: Jeffery Raymond Sewell dba Cargo Unlimited Worldwide, 74–854 Velie Way, #10, Palm Desert, CA 92260. Officer: Jeffery R. Sewell, Sole Proprietor, (Qualifying Individual).

Razak Logistics, Inc., 28451 Ficus Court, Murrieta, CA 92563. Officer: Farhan Qureshi, President/Secretary/Treasurer, (Qualifying Individual).

U.S. Africa Freight, Inc. dba U.S. Africa Shipping, dba U.S. 2 Africa

Freight, 930 Hoffner Avenue, Orlando, FL 32809. Officers: Esthela Montgomery, Secretary/Operations Manager, (Qualifying Individual), Neil E. Barclay, Director/Treasurer.

Dated: March 19, 2010.

Rachel E. Dickon,

Assistant Secretary.

[FR Doc. 2010–6557 Filed 3–23–10; 8:45 am]

BILLING CODE 6730–01–P

FEDERAL MARITIME COMMISSION

Ocean Transportation Intermediary License Reissuance

Notice is hereby given that the following Ocean Transportation Intermediary license has been reissued by the Federal Maritime Commission pursuant to section 19 of the Shipping Act of 1984 (46 U.S.C. Chapter 409) and the regulations of the Commission pertaining to the licensing of Ocean Transportation Intermediaries, 46 CFR Part 515.

License No.	Name/Address	Date reissued
012142NF	Seaborne International, Inc. dba Seaborne Express Line, 8901 South La Cienega Blvd., Suite 101, Inglewood, CA 90301.	February 6, 2010.

Sandra L. Kusumoto,

Director, Bureau of Certification and Licensing.

[FR Doc. 2010–6553 Filed 3–23–10; 8:45 am]

BILLING CODE 6730–01–P

GOVERNMENT ACCOUNTABILITY OFFICE

Advisory Council on Government Auditing Standards; Notice of Meeting

The Advisory Council on Government Auditing Standards will meet Thursday, April 22, 2010, from 8:15 a.m. to 3:30 p.m., in the Staats Briefing Room (7C13) of the Government Accountability Office Building, 441 G Street, NW., Washington, DC.

The Advisory Council on Government Auditing Standards will hold a meeting to discuss updates and revisions of the 2007 Revision of Government Auditing Standards. The meeting is open to the public. Members of the public will be provided an opportunity to address the Council with a brief (five minute) presentation in the afternoon on matters directly related to the proposed update and revision.

Any interested person who plans to attend the meeting as an observer must contact Jennifer Allison, Council Administrator, 202–512–3423. A form of

picture identification must be presented to the GAO Security Desk on the day of the meeting to obtain access to the GAO building. For further information, please contact Mrs. Allison. Please check the Government Auditing Standards Web page (<http://www.gao.gov/govaud/ybk01.htm>) one week prior to the meeting for a final agenda.

[Pub. L. 67–13, 42 Stat. 20 (June 10, 1921)]

Dated: March 19, 2010.

James R. Dalkin,

Director, Financial Management and Assurance.

[FR Doc. 2010–6526 Filed 3–23–10; 8:45 am]

BILLING CODE 1610–02–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

Agency Information Collection Activities: Submission for OMB Review; Comment Request

Periodically, the Substance Abuse and Mental Health Services Administration (SAMHSA) will publish a summary of information collection requests under OMB review, in compliance with the Paperwork Reduction Act (44 U.S.C.

Chapter 35). To request a copy of these documents, call the SAMHSA Reports Clearance Officer on (240) 276–1243.

Proposed Project: Transformation Accountability (TRAC) Reporting System —(OMB No. 0930–0285)—Revision

SAMHSA's CMHS is requesting approval for a revision to the National Outcome Measures (NOMs) for Consumers Receiving Mental Health Services. The name of this data collection effort is revised to the Transformation Accountability (TRAC) Reporting System (hereafter referred to as TRAC) to enable SAMHSA CMHS to consolidate its performance reporting activities within one package. This request includes a revision of the currently approved client-level data collection effort for programs providing direct services; additional questions will enable CMHS to more fully explain grantee performance in relation to Agency and/or program objectives. This request also includes the addition of data collection from Project Directors of grants engaged in infrastructure development, prevention, and mental health promotion activities. These new instruments will enable SAMHSA CMHS to capture a standardized set of

performance indicators using a uniform reporting method.

These proposed data activities are intended to promote the use of consistent measures among CMHS grantees and technical assistance contractors. These common measures recommended by CMHS are a result of extensive examination and recommendations, using consistent criteria, by panels of staff, experts, and grantees. Wherever feasible, the proposed measures are consistent with

or build upon previous data development efforts within CMHS. These data collection activities will be organized to reflect and support the domains specified for SAMHSA's NOMs for programs providing direct services, and the categories developed by CMHS to specify infrastructure development, prevention, and mental health promotion activities.

Client-Level Data Collection

The currently approved data collection effort for the SAMHSA CMHS

programs that provide direct services to consumers includes separate data collection forms that are parallel in design for use in interviewing adults and children (or their caregivers for children under the age of 11 years old). These SAMHSA TRAC data will be collected at baseline, at six month reassessments for as long as the consumer receives services, and at discharge. The proposed data collection encompasses eight of the ten SAMHSA NOMs domains.

Domain	Number of questions: adult	Number of questions: caregiver and child/adolescent
Access/Capacity	4	4
Functioning	28	26
Stability in Housing	1	2
Education and Employment	4	3
Crime and Criminal Justice	1	1
Perception of Care	15	14
Social Connectedness	4	4
Retention ¹	5	5
Total Number	63	59

¹ Retention is defined as retention in the community. The indicator is based on use of psychiatric inpatient services, which is based on a measure from the Stability in Housing Domain.

Changes to the current instruments include the following:

- The administrative section of all instruments was changed to allow grantees to capture and track when consumers refuse interviews, consent cannot be obtained from proxy, and consumers are impaired or unable to provide consent. The administrative section of the children's instruments was additionally changed to capture whether the respondent is the child or his/her caregiver.
- Questions were added to all instruments to capture general health, psychological functioning, life in the community, and substance use.
- CMHS reduced the data collection requirement for 3-month programs to be consistent with 6-month programs; all grant programs will now be required to collect the client-level interviews in 6-month intervals, and CMHS will require the completion of clinical discharge interviews.

In addition to questions asked of consumers as listed above, programs will be required to abstract information from consumer records regarding the services provided. The time to complete the revised instruments is estimated as shown below. These estimates are based

on grantee reports of the amount of time required to complete the currently approved instruments accounting for the additional time required to complete the new questions, as based on an informal pilot.

Infrastructure Development, Prevention, and Mental Health Promotion Performance Data Collection

CMHS has identified categories and associated grant- or community-level indicators to assess performance of grant programs engaged in infrastructure development, prevention, and mental health promotion activities. Upon approval of the indicators, a Web-based data entry system will be developed to capture this performance data for all CMHS-funded grants engaged in infrastructure development, prevention, and mental health promotion activities. Not all categories or indicators will apply to every grant program; CMHS Program Directors will be responsible for determining whether a category (or an indicator within a category) applies to each grant program, establishing targets at the grant level, and monitoring data submission. The following table summarizes the total number of

indicators for each category that may or may not apply to each grant program:

Category	Number of indicators
Policy Development	2
Workforce Development	5
Financing	3
Organizational Change	1
Partnerships/Collaborations	2
Accountability	6
Types/Targets of Practices	4
Awareness	1
Training	1
Knowledge/Attitudes/Beliefs	1
Screening	1
Outreach	2
Referral	1
Access	1
Total Number	31

Grantee Project Directors will be responsible for submitting data pertaining to these indicators quarterly. The use of standardized domains and data collection approaches will enhance aggregate data development and reporting.

Following is the estimated annual response burden for this effort.

ESTIMATE OF ANNUAL RESPONSE BURDEN

Type of response	Number of respondents	Responses per respondent	Total responses	Hours per response	Total hour burden
Client-level baseline interview	15,681	1	15,681	0.333	5,222
Client-level 6-month reassessment interview	10,646	1	10,646	0.367	3,907
Client-level discharge interview	4,508	1	4,508	0.367	1,655
Client-level baseline chart abstraction	2,352	1	2,352	0.1	235
Client-level reassessment chart abstraction	9,017	1	9,017	0.1	902
Client-level Subtotal	15,681		15,681		11,920
Infrastructure development, prevention, and mental health promotion quarterly record abstraction	942	4	3,768	4	15,072
Total	16,623				26,992

Written comments and recommendations concerning the proposed information collection should be sent by April 23, 2010 to: SAMHSA Desk Officer, Human Resources and Housing Branch, Office of Management and Budget, New Executive Office Building, Room 10235, Washington, DC 20503; due to potential delays in OMB's receipt and processing of mail sent through the U.S. Postal Service, respondents are encouraged to submit comments by fax to: 202-395-6974.

Dated: March 17, 2010.

Elaine Parry,

Director, Office of Program Services.

[FR Doc. 2010-6457 Filed 3-23-10; 8:45 am]

BILLING CODE 4162-20-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day-10-10AD]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call the CDC Reports Clearance Officer at (404) 639-5960 or send an e-mail to omb@cdc.gov. Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC or by fax to (202) 395-5806. Written

comments should be received within 30 days of this notice.

Proposed Project

School Dismissal Monitoring System—Existing Data Collection without an OMB Number—National Center for Emerging and Zoonotic Infectious Diseases (NCEZID) (proposed), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

During the spring 2009 H1N1 outbreak, the U.S. Department of Education (ED) and the Centers for Disease Control and Prevention (CDC) received numerous daily requests about the overall number of school dismissals nationwide including the number of students and teachers impacted by the outbreak. Illness among school-aged students (K-12) in many States and cities resulted in at least 1351 school dismissals due to rapidly increasing absenteeism among students or staff that impacted at least 824,966 students and 53,217 teachers.

Although a system was put in place to track school closures in conjunction with the Department of Education (ED), no formal monitoring system was established, making it difficult to monitor reports of school dismissal and to gauge the impact of the outbreak.

CDC has recently issued guidance for school closure for the 2009-2010 school year. To address the need to monitor reports of school closure, CDC and ED have established a School Dismissal Monitoring System to report on novel influenza A (H1N1)-related school or school district dismissals in the United

States. Although the School Dismissal Monitoring System is currently approved to collect data under OMB Control Number 0920-0008, Emergency Epidemic Investigations, CDC would like to continue the data collection long term. Thus, CDC is requesting a separate OMB Control Number for this data collection.

The purpose of the School Dismissal Monitoring System is to generate accurate, real-time, national summary data daily on the number of school dismissals and the number of students and teachers impacted by the school dismissals. CDC will use the summary data to fully understand how schools are responding to CDC community mitigation guidance among schools, students, household contacts and for overall awareness of the impact of influenza outbreaks on school systems and communities.

Respondents are schools, school districts, and local public health agencies. Respondents will use a common reporting form to submit data to CDC. The reporting form includes the following data elements: Name of school district; zip code of school district; date the school or school district was dismissed; and the date school or school district is projected to reopen. Optional data elements include: Name of person submitting information; the organization/agency; phone number of the organization/agency; and e-mail address. There is no cost to respondents other than their time to complete the data collection. The total annualized burden for this information collection request is 42 hours.