

technology. A comment to OMB is most effective if OMB receives it within 30 days of publication of this notice.

Issued in Washington, DC, on September 29, 2011.

**Walter Bohorfoush,**

*Director, Office of Systems Integration.*

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**BILLING CODE 4910-59-P**

## DEPARTMENT OF TRANSPORTATION

### Surface Transportation Board

[Docket No. NOR 42129; Docket No. FD 35517]

**American Chemistry Council, The Chlorine Institute, Inc., the Fertilizer Institute, and PPG Industries, Inc. v. Alabama Gulf Coast Railway and RailAmerica, Inc.; CF Industries, Inc. v. Indiana & Ohio Railway, the Point Comfort and Northern Railway, and the Michigan Shore Railroad—Petition for Declaratory Order**

**AGENCY:** Surface Transportation Board, DOT.

**ACTION:** Institution of declaratory order proceeding; request for comments.

**SUMMARY:** In response to a petition filed by CF Industries, Inc. (CF) on May 17, 2011, the Board is instituting a declaratory order proceeding under 49 U.S.C. 721 and 5 U.S.C. 554(e). CF requests that the Board declare invalid and unenforceable certain tariffs addressing the movement of Toxic-by-Inhalation Hazardous materials and Poison-by-Inhalation Hazardous materials (TIH/PIH) issued by 3 subsidiaries of RailAmerica, Inc. (RailAmerica): The Indiana & Ohio Railway Company, the Point Comfort and Northern Railway Company and the Michigan Shore Railroad, Inc. (collectively, the RailAmerica railroads). This proceeding will also develop the record with respect to a complaint filed by another shipper and several trade associations in Docket No. NOR 42129, which raises similar issues regarding the handling of TIH/PIH by another RailAmerica subsidiary.<sup>1</sup> The Board seeks public comment on the issues raised in both cases.

**DATES:** Any person who wishes to participate in this proceeding as a party of record (POR) must file, no later than October 17, 2011, a notice of intent to

participate. Discovery will close on November 29, 2011. Opening evidence and argument from all PORs is due on January 13, 2012. Reply evidence and argument from all PORs is due on February 27, 2012. Rebuttal evidence and argument from all PORs is due on March 13, 2012.

**ADDRESSES:** Any filing submitted in this proceeding must be submitted either via the Board's e-filing format or in the traditional paper format. Any person using e-filing should attach a document and otherwise comply with the instructions at the E-FILING link on the Board's Web site, at <http://www.stb.dot.gov>. Any person submitting a filing in the traditional paper format should send an original and 10 copies (and also an electronic version), referring Docket No. FD 35517, to: Surface Transportation Board, 395 E Street, SW., Washington, DC 20423-0001. In addition, 1 copy of each filing in this proceeding must be sent (and may be sent by e-mail if service by e-mail is acceptable to the recipient) to each of the following (1) Patrick E. Groomes, Fulbright & Jaworski, L.L.P., 801 Pennsylvania Avenue, NW., Washington, DC 20004-2623, [pgroomes@fulbright.com](mailto:pgroomes@fulbright.com) (representing CF); (2) Louis E. Gitomer, Law Offices of Louis E. Gitomer, 600 Baltimore Avenue, Suite 301, Towson, MD 21204, [Lou@lgrailaw.com](mailto:Lou@lgrailaw.com) (representing the RailAmerica railroads and the defendants in Docket No. NOR 42129); (3) Paul M. Donovan, LaRoe, Winn, Moerman & Donovan, 1250 Connecticut Avenue, NW., Suite 200, Washington, DC 20036, [paul.donovan@laroelaw.com](mailto:paul.donovan@laroelaw.com) (representing the complainants in Docket No. NOR 42129); (4) Jeffrey O. Moreno, Thompson Hine LLP, 1920 N Street, NW., Washington, DC 20036, [jeff.moreno@thompsonhine.com](mailto:jeff.moreno@thompsonhine.com) (representing TFI); and (5) any other person designated as a POR on the service-list notice (as explained in the Board's decision served on September 30, 2011, in Docket Nos. FD 35517 and NOR 42129<sup>2</sup>).

**FOR FURTHER INFORMATION CONTACT:** Julia Farr, (202) 245-0359.

Assistance for the hearing impaired is available through the Federal Information Relay Service (FIRS) at: 1-800-877-8339.

Copies of written comments will be available for viewing and self-copying at the Board's Public Docket Room, Room 131, and will be posted to the Board's Web site.

<sup>2</sup> The service-list notice will be issued as soon after October 17, 2011, as practicable.

**SUPPLEMENTARY INFORMATION:** CF and the NOR 42129 complainants challenge certain requirements for rail transportation of TIH/PIH promulgated by RailAmerica and several of its railroad subsidiaries. Under 5 U.S.C. 554(e), the Board has discretionary authority to issue a declaratory order to terminate a controversy or remove uncertainty. A declaratory order proceeding is thus instituted in this docket to invite broad public comment on the issues raised in Docket Nos. FD 35517 and NOR 42129. Any person seeking to comment on CF's petition in Docket No. FD 35517 or the complaint in Docket No. NOR 42129 may submit written comments to the Board (pursuant to the schedule and procedures set forth in this notice) regarding the reasonableness of the challenged TIH/PIH transportation requirements. For further information, please see the Board's decision served on September 30, 2011, in Docket Nos. FD 35517 and NOR 42129.

Board decisions and notices are available on our Web site at <http://www.stb.dot.gov>.

Decided: September 28, 2011.

By the Board, Chairman Elliott, Vice Chairman Begeman, and Commissioner Mulvey.

**Jeffrey Herzig,**

*Clearance Clerk.*

[FR Doc. 2011-25848 Filed 10-5-11; 8:45 am]

**BILLING CODE 4915-01-P**

## DEPARTMENT OF THE TREASURY

### Financial Crimes Enforcement Network

**Proposed Collection; Comment Request; Renewal With Changes to a Currently Approved Collection; the Registration of Money Services Business (MSB), FinCEN Report 107, To Incorporate Changes to the MSB Definitions and Add Provisions for Prepaid Access**

**AGENCY:** Financial Crimes Enforcement Network ("FinCEN"), Treasury.

**ACTION:** Notice and request for comments.

**SUMMARY:** As part of its continuing effort to reduce paperwork and respondent burden, FinCEN invites comment on a proposed information collection contained in a revised form, Registration of Money Services Business, FinCEN Form 107. The form will be used by dealers in foreign exchange; check cashers; issuers, sellers, and redeemers of traveler's checks and money orders; providers of prepaid access; and money transmitters to register with the

<sup>1</sup> In Docket No. NOR 42129, the complainants are American Chemistry Council, The Chlorine Institute, Inc., The Fertilizer Institute (TFI), and PPG Industries, Inc. (collectively, the NOR 42129 complainants), and the defendants are Alabama Gulf Coast Railway LLC and RailAmerica (collectively, the NOR 42129 defendants).

Department of the Treasury as required by statute. This request for comments is being made pursuant to the Paperwork Reduction Act of 1995, Public Law 104-13, 44 U.S.C. 3506(c)(2)(A).

**DATES:** Written comments are welcome and must be received on or before December 5, 2011.

**ADDRESSES:** Written comments should be submitted to: Office of Regulatory Policy and Programs Division, Financial Crimes Enforcement Network, Department of the Treasury, P.O. Box 39, Vienna, Virginia 22183. *Attention:* PRA Comments—MSB Registration—Form 107. Comments also may be submitted by electronic mail to the following *Internet address:* [regcomments@fincen.gov](mailto:regcomments@fincen.gov), again with a caption, in the body of the text, “*Attention:* PRA Comments—MSB Registration—Form 107.”

*Inspection of comments:* Comments may be inspected, between 10 a.m. and 4 p.m., in the FinCEN reading room in Vienna, VA. Persons wishing to inspect the comments submitted must request an appointment with the Disclosure Officer by telephoning (703) 905-5034 (Not a toll free call).

**FOR FURTHER INFORMATION CONTACT:** The FinCEN Regulatory helpline at (800) 949-2732 and select Option 1.

**SUPPLEMENTARY INFORMATION:**

*Title:* Registration of Money Services Business.

*OMB Number:* 1506-0013.

*Form Number:* FinCEN Form 107.

*Abstract:* The statute generally referred to as the “Bank Secrecy Act,” (“BSA”) Titles I and II of Public Law 91-508, as amended, codified at 12 U.S.C. 1829b, 12 U.S.C. 1951-1959, and 31 U.S.C. 5311-5330, authorizes the Secretary of the Treasury, *inter alia*, to issue regulations requiring records and reports that are determined to have a high degree of usefulness in criminal, tax, and regulatory matters. Regulations implementing Title II of the BSA (codified at 31 U.S.C. 5311-5330) appear at 31 CFR chapter X. The authority of the Secretary to administer the BSA has been delegated to the Director of FinCEN.

Under 31 U.S.C. 5330 and its implementing regulations, money services businesses must register with the Department of the Treasury, maintain a list of their agents, and renew their registration every two years. Currently, money services businesses register by filing FinCEN Form 107, which is being revised to incorporate changes to the MSB definitions<sup>1</sup> and provide for prepaid access program<sup>2</sup>

information. The information collected on the form is required to comply with 31 U.S.C. 5330 and its implementing regulations. The information will be used to assist supervisory and law enforcement agencies in the enforcement of criminal, tax, and regulatory laws and to prevent money services businesses from being used by those engaging in money laundering, terrorist financing and other illicit financial crimes. The collection of information is mandatory.

*Current Actions:* The current FinCEN Form 107 and instructions are being revised to update the information collection tool as follows:

Part I adds Item 1e, RMSB Registration number for all but initial registrations.

Part II expands Item 3 into separate fields to record last name/entity, adds a check box to indicate “if entity,” adds first name and middle initial boxes. In Item 6, adds AKA to the DBA entry, adds a box to indicate a foreign country, adds a box to indicate the type of taxpayer identification number (TIN), adds a space for recording a Web site (URL) address if available, and adds spaces to identify the name and phone number of the compliance contact person for the MSB.

Part III repeats the same name entry expansion, TIN and TIN type as in part II. E-mail address and Web site info is added and removes ID information box 23 on the current form.

Part IV adds a check box to indicate foreign locations, adds to the MSB services provided check boxes to indicate seller of prepaid access and provider of prepaid access, and updates the existing terminology to match the new MSB definitions. Added to part IV is an entry to list financial services being provided that are in addition to those already indicated. Added in part IV are a series of information boxes regarding prepaid access that are to be completed if the registrant is a provider of prepaid access. This revision adds the name of the prepaid program, the IIN/BIN (first six numbers), the name of the processor, and compliance point of contact to include the phone number and provides a check box to indicate if the listed program is useable internationally. This revision updates part IV to clarify reporting the number of U.S. agents providing MSB services.

Part V, Primary Transaction Account for MSB Activities, adds depository institution routing number, depository institution IBAN if foreign, country code, type of financial institution (depository institution, non-depository or foreign) in addition to existing information.

Parts VI and VII change the name to add, respectively, address and signature of the Agent for Service of Process.

*Type of Review:* Renewal with change of a currently approved collection report.

*Affected public:* Individuals, business or other for-profit institutions, and not-for-profit institutions.

*Frequency:* Every two years.<sup>3</sup>

*Estimated Burden:* Reporting average of 30 minutes per response; recordkeeping average of 30 minutes per response.

*Estimated number of respondents:* 44,300.

*Estimated Total Annual Burden Hours:* 22,150 hours.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless the collection of information displays a valid Office of Management and Budget (OMB) control number. Records required to be retained under the BSA must be retained for five years. Generally, information collected pursuant to the BSA is confidential, but may be shared as provided by law with regulatory and law enforcement authorities.

*Request for Comments:*

Comments submitted in response to this notice will be summarized and/or included in the request for OMB approval. All comments will become a matter of public record. Comments are invited on: (a) Whether the 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 collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; (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; (e) estimates of capital or start-up costs and costs of operation, maintenance and purchase of services to provide information; (f) whether it is a business practice for providers of prepaid access to contract with more than one payment processor and if so, please explain why and how many; and (g) any other aspect of the revised form and instructions.

Dated: September 26, 2011.

**Nicholas Colucci,**  
*Acting Director, Financial Crimes  
Enforcement Network.*

**BILLING CODE 4810-02-P**

<sup>1</sup> See 76 FR 43585, dated July 21, 2011.

<sup>2</sup> See 76 FR 45403, dated July 29, 2011.

<sup>3</sup> Per 31 CFR 1022.380(b)(2).

<p><b>FinCEN Report 107</b> BSA E-File Only</p>	<p><b>Bank Secrecy Act</b> <b>Registration of Money Services Business</b></p> <p>Please type or print. Always complete entire report. See instructions for items marked with an asterisk ( * ).</p>	 OMB No.1506-0013		
<b>Part I Filing Information</b>				
1 Indicate the type of filing by checking a, b, or d below (Check only one). If filing a <u>correction</u> , check "c" and either a, b, or d. a <input type="checkbox"/> Initial registration    b <input type="checkbox"/> Renewal    c <input type="checkbox"/> Correct/amend a prior report    d <input type="checkbox"/> Re-registration e Enter RMSB registration number if 1b, 1c, or 1d is checked _____				
2 If you checked item 1d please indicate the reason(s). Check all that apply. a <input type="checkbox"/> Re-registered under state law    b <input type="checkbox"/> More than 10 percent transfer of equity interest    c <input type="checkbox"/> More than 50 percent increase in agents				
<b>Part II Registrant Information</b>				
*3 Individual's last name, or entity's legal name		a <input type="checkbox"/> If entity	*4 First name	*5 Middle initial
6 Alternate name, e.g., AKA - individual or DBA - entity		*7 Address		*8 City
*10 ZIP/Postal Code		*11 Country code	*12 TIN	*13 TIN type a <input type="checkbox"/> SSN/TIN b <input type="checkbox"/> EIN c <input type="checkbox"/> Foreign
14 Date of birth		MM / DD / YYYY		
15 Telephone number	15 a Ext.	16 E-mail address (if available)		
17 Website address (URL) (if available)				
18 Name of compliance contact person for this registered MSB		19 Compliance telephone number (if different than item 15)		19 a Ext.
<b>Part III Owner or Controlling Person</b>				
20 Individual's last name, or entity's legal name		a <input type="checkbox"/> Entity	21 First name	22 Middle initial
23 Address		24 City		25 State
26 ZIP/Postal Code		27 Country code		
28 TIN		29 TIN type a <input type="checkbox"/> SSN/TIN b <input type="checkbox"/> EIN c <input type="checkbox"/> Foreign	30 Date of birth	
31 E-mail address (if available)		MM / DD / YYYY		
32 Website address (URL) (if available)		33 Telephone number		33 a Ext.
<b>Part IV Money Services and Product Information</b>				
34 U.S. States and/or territories where the registrant, its agents or branches are physically located and/or providing MSB services. Check box a, b, or c as appropriate ( <u>Check only one</u> ) and do not check individual state/territory boxes. If box a, b, or c does not apply, check as many state/territory boxes as necessary. If services are also provided in foreign locations (non-US and US Territories) check box d. a <input type="checkbox"/> All States & Territories    b <input type="checkbox"/> All States    c <input type="checkbox"/> All Territories    d <input type="checkbox"/> Foreign locations				
<input type="checkbox"/> Alabama (AL)	<input type="checkbox"/> Georgia (GA)	<input type="checkbox"/> Maryland (MD)	<input type="checkbox"/> New York (NY)	<input type="checkbox"/> South Dakota (SD)
<input type="checkbox"/> Alaska (AK)	<input type="checkbox"/> Guam (GU)	<input type="checkbox"/> Massachusetts (MA)	<input type="checkbox"/> North Carolina (NC)	<input type="checkbox"/> Tennessee (TN)
<input type="checkbox"/> American Samoa (AS)	<input type="checkbox"/> Hawaii (HI)	<input type="checkbox"/> Michigan (MI)	<input type="checkbox"/> North Dakota (ND)	<input type="checkbox"/> Texas (TX)
<input type="checkbox"/> Arizona (AZ)	<input type="checkbox"/> Idaho (ID)	<input type="checkbox"/> Minnesota (MN)	<input type="checkbox"/> N. Mariana Isls. (MP)	<input type="checkbox"/> Utah (UT)
<input type="checkbox"/> Arkansas (AR)	<input type="checkbox"/> Illinois (IL)	<input type="checkbox"/> Mississippi (MS)	<input type="checkbox"/> Ohio (OH)	<input type="checkbox"/> Vermont (VT)
<input type="checkbox"/> California (CA)	<input type="checkbox"/> Indiana (IN)	<input type="checkbox"/> Missouri (MO)	<input type="checkbox"/> Oklahoma (OK)	<input type="checkbox"/> Virgin Islands (VI)
<input type="checkbox"/> Colorado (CO)	<input type="checkbox"/> Iowa (IA)	<input type="checkbox"/> Montana (MT)	<input type="checkbox"/> Oregon (OR)	<input type="checkbox"/> Virginia (VA)
<input type="checkbox"/> Connecticut (CT)	<input type="checkbox"/> Kansas (KS)	<input type="checkbox"/> Nebraska (NE)	<input type="checkbox"/> Palau (PW)	<input type="checkbox"/> Washington (WA)
<input type="checkbox"/> Delaware (DE)	<input type="checkbox"/> Kentucky (KY)	<input type="checkbox"/> Nevada (NV)	<input type="checkbox"/> Pennsylvania (PA)	<input type="checkbox"/> West Virginia (WV)
<input type="checkbox"/> District of Columbia (DC)	<input type="checkbox"/> Louisiana (LA)	<input type="checkbox"/> New Hampshire (NH)	<input type="checkbox"/> Puerto Rico (PR)	<input type="checkbox"/> Wisconsin (WI)
<input type="checkbox"/> FS of Micronesia (FM)	<input type="checkbox"/> Maine (ME)	<input type="checkbox"/> New Jersey (NJ)	<input type="checkbox"/> Rhode Island (RI)	<input type="checkbox"/> Wyoming (WY)
<input type="checkbox"/> Florida (FL)	<input type="checkbox"/> Marshall Islands (MH)	<input type="checkbox"/> New Mexico (NM)	<input type="checkbox"/> South Carolina (SC)	

<b>Part IV (continued)</b>		<b>2</b>
35 Enter the number of US branches of the registrant. <b>Reminder: do not separately register each branch.</b> See instructions for an explanation of the term "branch".		
36 Money services business activities of the registrant in the US. Check as many as apply. See instructions for an explanation of the terms. a <input type="checkbox"/> Issuer of traveler's checks      d <input type="checkbox"/> Seller of money orders      g <input type="checkbox"/> Check casher (including traveler's and money orders) b <input type="checkbox"/> Seller of traveler's checks      e <input type="checkbox"/> Dealer in foreign exchange      h <input type="checkbox"/> Seller of prepaid access c <input type="checkbox"/> Issuer of money orders      f <input type="checkbox"/> Money transmitter      i <input type="checkbox"/> Provider of prepaid access		
37 If you are providing financial services <u>in addition</u> to those checked in item 36 please briefly describe.		
If item "36i" is checked, provide the following information (items 38 to 43) to identify each prepaid program for which the registrant is the provider of prepaid access (Information for up to 999 programs may be entered).		
38 Name of prepaid program	39 IIN (BIN) of this program (First six digits mandatory)	40 Name of processor
41 Name of compliance contact person for this program	42 Contact phone number	42a Ext.
43 Is this prepaid program useable internationally? Yes <input type="checkbox"/> No <input type="checkbox"/>		
44 Is any part of the registrant's US money services business an informal value transfer system? See the explanation of "money transmitter" in the instructions. a <input type="checkbox"/> Yes b <input type="checkbox"/> No		
45 Is any part of the registrant's US money services business conducted from a vehicle? a <input type="checkbox"/> Yes b <input type="checkbox"/> No		
46 Enter the number of US agents authorized to conduct each money services business activity. Do not include US branches, or persons who are solely employees. See instructions for an explanation of the term "agent".		
a Number of US agents selling traveler's checks	d Number of US agents conducting money transmission	
b Number of US agents selling money orders	e Number of US agents engaged in check cashing (including traveler's checks and money orders)	
c Number of US agents involved as a dealer in foreign exchange	f Number of US agents selling prepaid access	
<b>Part V Primary Transaction Account for MSB Activities</b>		
<b>NOTE:</b> See instructions for an explanation of the term "transaction account". The registrant's primary transaction account is the account that has the greatest annual dollar amount of money services business activity. In items 47 through 56 enter information about the registrant's primary transaction account for money services business activities.		
47 Name of financial institution where the primary transaction account is held		48 Depository financial institution routing number
49 Primary account number	50 Depository financial institution IBAN (if foreign)	
51 Address	52 City	53 State   54 ZIP/Postal Code
55 Country code	56 Type of financial institution where the primary transaction account is held (NOTE: If box "a" is checked, items 48 and 49 are required. If box "c" is checked, item 50 is required). a <input type="checkbox"/> Depository institution      b <input type="checkbox"/> Non-depository institution      c <input type="checkbox"/> Foreign	
<b>Part VI Location of Supporting Documentation/Address of Agent for Service of Process</b>		
If the supporting documentation is kept at the location reported in Part II check here <input type="checkbox"/> and continue to Part VII. If not, complete the information here in Part VI. If the MSB is located outside of the United States, enter the information of the U.S. agent for service of legal process.		
57 Address		
58 City	59 State	60 ZIP/Postal Code   61 Country code
<b>Part VII Authorized Signature/Signature of Agent for Service of Process</b>		
I am authorized to file this form on behalf of the money services business listed in Part II. I declare that the information provided is true, correct and complete. I understand that the money services business listed in Part II is subject to the Bank Secrecy Act and its implementing regulations. The money services business listed in Part II maintains a current list of all agents, an estimate of its business volume in the coming year, and all other information required to comply with 31 U.S.C. 5330 and the regulations thereunder. <b>The signature of the owner, controlling person, authorized corporate officer, or U.S. agent for service of legal process is mandatory.</b>		
62 Signature	63 Print name	
64 Title	65 Date of signature MM / DD / YYYY	

## General Information

### Who Must Register

Generally money services businesses (MSBs) must register with the Department of the Treasury, using this report, FinCEN 107, Registration of Money Services Business. However, not all MSBs are required to register. For example, if you are an MSB solely because you are an agent of another MSB, you are not required to register. The discussion below will help you determine whether or not you are an MSB that is required to register. For more information visit [http://www.fincen.gov/financial\\_institutions/msb/](http://www.fincen.gov/financial_institutions/msb/).

The term money services business includes:

1. Dealer in foreign exchange who transacts in an amount greater than \$1,000 for any one customer on any day, whether or not for same day delivery.
2. Check casher who accepts checks or other monetary instruments in return for currency or a combination of currency and other monetary instruments for any one customer on any day.
3. Issuer or seller of traveler's checks who issues or sells more than \$1,000 in traveler's checks or money orders for any one customer on any day. "Issuer" is defined or determined by virtue of the amount at which its monetary instruments or traveler's checks are sold, as opposed to the amounts at which they are issued. For example, the amount of the sale includes the face value of the monetary instruments plus any fees.
4. Provider of prepaid access who agrees to be the provider with respect to a prepaid access program or is determined to have primary oversight and control over the prepaid access program and serves as the principal conduit for access to information from its fellow program participants. Considerations for a provider determination include whether a party organizes the program; sets the terms and conditions of the prepaid program and determines that the terms have not been exceeded; determines the other businesses that will participate in the prepaid program, which may include the issuing bank the payment processor, or the distributor; controls or directs the appropriate party to initiate, freeze, or terminate prepaid access; and engages in activity that demonstrates oversight and control of the prepaid program.
5. Money transmitter.
6. U.S. Postal Service.
7. Seller of prepaid access.

The following are not required to register:

1. A business that is an MSB solely because it serves as an agent of another MSB. For example, a supermarket corporation that sells money orders for an issuer of money orders is not required to register. This is true even if the supermarket corporation serves as an agent for two or more

MSBs. However, an MSB that serves as an agent of another MSB and engages in MSB activities on its own behalf must register. For example, a supermarket corporation must register if, in addition to acting as an agent of the money order issuer, it provides check cashing or currency exchange services on its own behalf in an amount greater than \$1,000 for any one person on any day.

2. The United States Postal Service, any agency of the United States, of any state, or of any political subdivision of any state.

3. A seller of prepaid access is any person that receives funds or the value of funds in exchange for an initial loading or subsequent loading of prepaid access, unless that person only sells prepaid access offered under a prepaid program that cannot be used before verification of customer identification and has implemented policies and procedures reasonably adapted to prevent the sale of more than \$10,000 of any type of prepaid access.

For the regulatory definition of "money services business" see 31 CFR 1010.100 (ff).

The following terms are used in the form and instructions to describe a money services business:

1. An "agent" is a separate business entity from the issuer that the issuer authorizes, through written agreement or otherwise, to sell its instruments or, in the case of funds transmission, to sell its send and receive transfer services. A person who is solely an employee of the MSB is not an agent of that MSB. A branch is not a separate business entity and is therefore not an agent.

2. A "branch" is an owned location of either an issuer or agent at which financial services are sold. An MSB should not separately register each of its branches. A mobile operation owned by an MSB is a branch of that MSB. The MSB's headquarters is not a branch. If the MSB has only one location, that location is not a branch.

3. A "check casher" is a person that accepts checks (as defined in the Uniform Commercial Code), or monetary instruments (as defined at § 1010.100(dd)(1)(ii), (iii), (iv), and (v)) in return for currency or a combination of currency and other monetary instruments or other instruments, in an amount greater than \$1,000 for any person on any day in one or more transactions.

4. A "dealer in foreign exchange" is a person that accepts the currency, or other monetary instruments, funds, or other instruments denominated in the currency, of one or more countries in exchange for the currency, or other monetary instruments, funds, or other instruments denominated in the currency, of one or more other countries in an amount greater than \$1,000 for any other person on any day in one or more transactions, whether or not for same day delivery.

5. "Informal value transfer system." See explanation of the term money transmitter.

6. An "issuer" is the business that is ultimately responsible for payment of money orders or travelers checks as the drawer of such instruments, or a money transmitter that has the obligation to guarantee payment of a money transfer.

7. A “money transmitter” is (A) a person that provides money transmission services. The term “money transmission services” means the acceptance of currency, funds, or other value that substitutes for currency from one person *and* the transmission of currency, funds, or other value that substitutes for currency to another location or person by any means. “Any means” includes, but is not limited to, through a financial agency or institution; a Federal Reserve Bank or other facility of one or more Federal Reserve Banks, the Board of Governors of the Federal Reserve System, or both; an electronic funds transfer network; or an informal value transfer system; or (B) Any other person engaged in the transfer of funds.

An “informal value transfer system” is a kind of money transmitter. An informal value transfer system includes any person who engages as a business in an informal money transfer system or any network of people who engage as a business in facilitating the transfer of money domestically or internationally outside of the conventional financial institutions system.

8. A “person” is an individual, a corporation, a partnership, a trust or estate, a joint stock company, an association, a syndicate, joint venture, or other unincorporated organization or group, an Indian Tribe (as that term is defined in the Indian Gaming Regulatory Act), and all entities cognizable as legal personalities.

9. A “seller” is a business that issuers or providers authorize, through written agreement or otherwise, to sell their instruments, services, or products or their send and receive transfer services.

10. A “transaction account” is a deposit or account on which the depositor or account holder is permitted to make withdrawals by negotiable or transferable instrument, payment orders of withdrawal, telephone transfers, or other similar items for the purpose of making payments or transfers to third persons or others. Such terms include demand deposits, negotiable order of withdrawal accounts, savings deposit subject to automatic transfers, and share draft accounts. See 12 USC 461(b)(1)(c).

#### **Where and When to Register**

##### **Where to Register:**

**Go to the BSA E-Filing Home Page; <http://bsae filing.fincen.treas.gov/main.html> and if not registered click on “Become a BSA E-File” button to establish and set up your account. If you are already registered, log into your account.**

##### **When to Register:**

*Initial registration:* File the report within 180 days after the date the business is established.

*Renewal:* Each MSB must renew its registration every two years, on or before December 31. See 31 CFR 1022.380(b)(2). For example, if an MSB registered on October 15, 2003, it must file a renewal by December 31, 2004, and then every 24 months thereafter (on or before December 31, 2006, then December 31, 2008, etc.). **Renewals must be submitted on a new**

**FinCEN Report 107. Photocopies of previously submitted forms/reports or facsimiles will not be accepted for renewal purposes**

**Special Actions:**

*Correct/amend a prior report:* Log in to the BSA E-File website, and complete all Parts of a new FinCEN report 107.

*Re-registration:* Refile a new registration report when one of the following events occurs:

1. a change in ownership requiring re-registration under state registration law;
2. more than 10 percent of voting power or equity interest is transferred (except certain publicly-traded companies) or;
3. the number of agents increases by more than 50 percent.

The Financial Crimes Enforcement Network (FinCEN) will immediately send a confirmation message of receipt of filing upon submission. An acknowledgment that the registration has been accepted, processed, and recorded will be available on the E-Filing System status page in approximately two business days. The listing will be published on FinCEN's official MSB registration list (URL TBD) in approximately two weeks. If you have general questions about MSB regulatory requirements, please contact FinCEN's Regulatory Helpline at 800-949-2732, Option 1. If you have electronic filing questions, please contact the BSA E-Filing Help Desk at 866-346-9478, Option 1.

**General Instructions**

**NOTE: All items on FinCEN Report 107 should be completed fully and accurately. Items marked with an asterisk (\*) must be completed for the registration to be accepted, processed, and recorded.**

1. This report is available on the FinCEN's BSA E-Filing web site at <http://bsaeifiling.fincen.treas.gov/main.html>.
2. Unless there is a specific instruction to the contrary, leave blank any items that do not apply or for which information is not available.
3. Complete the report by providing as much information as possible.
4. Do not include supporting documents with this report.
5. Enter all dates in MM / DD / YYYY format where MM=month, DD=day, and YYYY=year. Precede any single number with a zero, *i.e.*, 01, 02, etc.
6. List all U.S. telephone numbers with area code first and then the seven-digit phone number, using the format (XXX) XXX-XXXX.

7. Always enter an individual's name as last name, first name, and middle initial (if known). If a legal entity is listed, enter its name in the last name field.

8. Enter identifying numbers starting from left to right. Do not include spaces, dashes, or other punctuation. Identifying numbers include social security number (SSN), employer identification number (EIN), individual taxpayer identification number (ITIN), alien registration number, driver's license/state identification, foreign national identification, and passport number.

9. Enter all Post Office ZIP Codes from left to right with at least the first five numbers, or with all nine (ZIP + 4) if known.

10. Addresses: Enter the US permanent street address, city, two-letter state or territory abbreviation used by the U.S. Postal Service and ZIP Code (ZIP+4 if known) of the individual or entity. A post office box number should not be used for an individual, unless no other address is available. For an individual, also enter any apartment number, suite number, or road or route number. If a P.O. Box is used for an entity, enter the street name, suite number, and road or route number.

If the address of the individual or entity in PART II or III is in a foreign country, enter the city, province or state, postal code and the name of the country. Complete any part of the address that is known, even if the entire address is not known.

### Specific Instructions

#### Part I Filing Information

See "When to Register" in the General Information part of these instructions.

**Item 1--** Check either box a, b, or d (only one) for the type of filing. If this report corrects an earlier filing, check box "c" and either box a, b, or d. Complete "1e" if a registration number has been provided by a US Federal or State Government Agency.

**Item 2--** If you checked box 1d, please indicate the reason by checking boxes a, b, or c (check all that apply).

#### Part II Registrant Information

Enter information for the US State or Territory operating location.

**Items \*3, \*4, and 5-- Individual's last name, or entity's legal name, First name, and Middle initial.** If a sole proprietorship, enter the last name of the proprietor in item \*3, followed by the first name and middle initial in items \*4 and 5, respectively. If an entity, enter the full legal name of the registrant money services business as it is shown on the charter or other document creating the entity in item \*3 and check the "If entity" box in the upper right hand corner. Leave items \*4 and 5 blank. For example, enter "Good Hope Enterprises, Inc." when the money services business is Good Hope Enterprises, Inc.

**Item 6-- Alternate name, e.g., AKA - individual or DBA - entity.** If applicable, enter any alternate name of the registrant, such as a separate Doing Business As name. For example, if

Good Hope Enterprises, Inc., is doing business as "Joe's Check Cashing" enter in item 6, "Joe's Check Cashing."

**Items \*7, \*8, \*9, \*10, and \*11-- Address.** Enter the permanent address of the registrant that is being registered. If the permanent address is not located in the United States, enter the country code in item \*11 and as much of the information in items \*9 and \*10 as possible. Country codes can be found in the BSA e-filing drop-down list.

**Item \*12-- TIN (Tax Identification Number).** If the registrant is an entity enter its employer identification number (EIN). If the registrant is an individual and a U. S. Citizen or an alien with a social security number, enter his/her SSN. If the registrant is an individual who is an alien and has an individual taxpayer identification number, enter his/her ITIN.

**Item \*13-- TIN type.** Indicate what type of identification number was entered into item \*12, SSN/ITIN or EIN. If the entity does not have a SSN, ITIN or EIN and is located outside of the United States, indicate that the entity is foreign. If foreign is checked, \*12 maybe left blank.

**Item 14-- Date of Birth.** Indicate the date of birth of the individual or sole proprietor registrant identified in item \*3. If item \*3 is an entity leave blank.

**Item 15-- Telephone number.** Enter the telephone number of the MSB listed in item 3, including any extension where applicable.

**Item 16-- E-mail address (If available).** If the MSB has an e-mail address please enter it here. An e-mail address may be used to contact the MSB should questions arise regarding its registration.

**Item 17-- Website address (URL) (If available).** If the MSB has a website please enter the URL here. The website may be used to confirm any details of the registration that are unclear or incomplete.

**Item 18-- Name of compliance contact person for this registered MSB.** Enter name "if entity" is checked or if different individual listed in item 3.

**Item 19-- Compliance telephone number** (If different than item 15).

**Item 19a-- Extension** (if applicable).

### **Part III Owner or Controlling Person**

**General:** Any person who owns or controls an MSB, or is an authorized agent in the United States, is responsible for registering the MSB. Only one registration report is required for any business in any registration period.

If more than one person owns or controls the business, they may enter into an agreement designating one of them to register the business. The designated owner or controlling person

must complete Part III and provide the requested information. In addition, that person must sign and date the form as indicated in Part VII. Failure by the designated person to register the business does not relieve any other person who owns or controls the business of the liability for failure to register the business.

An "Owner or Controlling Person" includes the following:

<i>Registrant Business</i>	<i>Owner or Controlling Person</i>
Sole Proprietorship.....	the individual who owns the business
Partnership.....	a general partner
Trust.....	a trustee
Corporation.....	the largest single shareholder

If two or more persons own equal numbers of shares of a corporation, those persons may enter into an agreement as explained above that one of those persons may register the business. If the owner or controlling person is a corporation, a duly authorized officer of the owner-corporation may execute the form on behalf of the owner-corporation.

**Items 20 to 33**--Enter the applicable information for the owner or controlling person. The individual's home address and phone number should not be used, unless a business address and phone number are unavailable.

**Items 23, 24, 25, 26, and 27-- Address.** Enter the permanent address of the owner or controlling person. If the permanent address is not located in the United States, enter the country code in item 27 and as much of the information in items 25 and 26 as possible. Country codes can be found in the BSA e-filing drop-down list.

**Item 28--TIN.** If the owner or controlling person is an entity enter its employer identification number (EIN). If the owner or controlling person is an individual and a U. S. Citizen or an alien with a social security number, enter his/her SSN. If the owner or controlling person is an individual who is an alien and has an individual taxpayer identification number, enter his/her ITIN.

**Item 29-- TIN type.** Indicate what type of identification number was entered into item 28, SSN/ITIN or EIN. If the entity does not have a SSN, ITIN or EIN and is located outside of the United States, indicate that the entity is foreign. If foreign is checked, 26 maybe left blank.

**Item 30-- Date of Birth.** Indicate the date of birth of the individual or sole proprietor registrant identified in Item 20. If item 20 is an entity leave blank.

**Item 31-- E-mail address (If available).** If the individual or entity listed in item 20 has an e-mail address please enter it here. An e-mail address may be used should questions arise regarding this registration.

**Item 32-- Website address (URL) (If available).** If the individual or entity listed in item 20 has a website please enter the URL here. The website may be used to confirm any details of the registration that are unclear or incomplete.

**Item 33 and 33a-- Telephone number and Extension (if any).** Enter the telephone number of the individual or entity listed in item 20, including any extension where applicable.

#### **Part IV Money Services and Product Information**

**Item 34 --States and/or territories where the registrant, its agents or branches are physically located and/or providing MSB services.** Check box "a" for All States and Territories, "b" for All States, or "c" for All Territories (Check only one) as appropriate, and **do not** check any individual state or territory boxes. If box a, b, or c **does not apply**, check as many state or territory boxes as necessary. If a service is offered on tribal lands, mark the box for the state, territory or district in which the tribal lands are located. If services are also provided in foreign locations, check box "d."

**Item 35 --Enter the number of branches of the registrant.** Enter the number of branches of the money services business at which one or more MSB activities are offered. If there are no branches, enter zero. See the General Information for an explanation of the term "branch."

**Item 36 --MSB activities of the registrant.** Items 36a through 36i are MSB activities. Check the box of each MSB activity conducted by the registrant at its branches. See the General Information for an explanation of the terms "issuer," "seller," "dealer in foreign exchange," "check casher," "provider of prepaid access," "seller of prepaid access," and "money transmitter." If the MSB activity is not listed here, check box "z Other" and enter a brief description in the space provided.

**Item 36i--** A Provider of prepaid access is required to "identify each prepaid program for which it is the provider of prepaid access." What constitutes a separate prepaid program is left to the business judgment of the provider of prepaid access; however the information required in items 37 - 42 is illustrative of the factors that should be considered. Items 37 to 42 may be repeated up to 999 times. For example, where programs have separate names, different issuing banks or Issuer Identification Numbers (IIN), or where one program can be used internationally and another not, the programs should be identified separately.

**Item 37--** If you are providing financial services in addition to those checked in item 34 please briefly describe.

**Item 38-- Prepaid Access Program Identification.** If item 36i (Provider of Prepaid Access) is checked, the Provider must "identify each prepaid program for which the registrant is the provider of prepaid access. . . ." Item 38 allows space to identify the name(s) of the program(s) for which the registrant is a provider. A "program" for item 38 may be ascertained by the services offered or geographical areas served or by some other manner determined by the provider.

**Item 39-- IIN/ BIN.** List the Issuer Identification Number ("IIN") or the bank identification number ("BIN), if any (First six digits are mandatory).

**Item 40-- Name of processor.** Provide the name of the processor for the particular prepaid access program.

**Items 41, 42, and 42a-- Name and telephone number of compliance contact person for this program. (Complete only if different than PART II items 18, 19, and 19a)** Provide the name and telephone number of a person with knowledge of the program and who can be a meaningful contact for law enforcement. Such a person may be one with day-to-day knowledge of the program.

**Item 43--Is this program useable internationally?** A program may be useable internationally if funds or the value of funds are accessible, by any means, outside of the United States. Accordingly, if for example, the program allows for ATM usage or point of sale transactions in countries outside of the United States, it is useable internationally.

**Item 44 --Informal value transfer system.** If any part of the registrant's money services business is an informal value transfer system, check yes. An informal value transfer system is a kind of money transmitter. See the General Information explanation of the term "money transmitter."

**Item 45 --Mobile operation.** If any part of the registrant's money services business is conducted as a mobile operation, check yes. A mobile operation is one based in a vehicle. For example, a check cashing service offered from a truck is a mobile operation. For purposes of item 35, each mobile operation should be counted as a separate branch.

**Item 46 --Number of agents.** Enter the number of agents that the registrant has authorized to sell or distribute its MSB services. Do not count the MSB headquarters, branches or any person who is solely an employee of the MSB. A bank is not an agent for this purpose. See the General Information for an explanation of the term "agent."

#### **Part V Primary Transaction Account for MSB Activities**

**Items 47, 48 and 49--Name of the financial institution where the primary transaction account is held, routing number and account number.** Enter the name of the bank or other financial institution where the registrant has its primary transaction account. Provide the routing number (the digits on the lower left side of a check) and the account number (the digits centered on the bottom of a check) for the primary transaction account. See the General Information for an explanation of the term "transaction account."

**Item 50--Depository financial institution IBAN (international bank account number, if foreign).** If the transaction account is maintained at a financial institution located outside of the United States (Item 55 is other than US), enter the accounts international bank account number.

**Items 51 to 54--**Enter the address for the financial institution where the transaction account is maintained.

**Item 55—Country code.** If the permanent address is not located in the United States, enter the country code in item 55. Country codes can be found in the BSA e-filing drop-down list.

**Item 56—Type of financial institution where the primary transaction account is held.**

Check box “a” if the primary account is held at a bank, thrift or credit union, or check box “b” if the primary account is held at a financial institution other than a bank. In addition to box “a” or “b,” check box “c” if the depository institution or non-depository institution is located outside of the United States. For example, box “a” and box “c” may be checked if the primary transaction account is held at a bank located outside of the United States.

**Part VI Location of Supporting Documentation/ Address of Agent for Service of Process  
Designation of Agent for Service of Process**

A foreign located MSB is required by 31 CFR 1022.380(2) to “designate the name and address of a person who resides in the United States and is authorized, and has agreed, to be an agent to accept service of legal process . . . .” Designation of such an agent is accomplished by entering the agent’s information in Part VI, Location of Supporting Documentation/Address of Agent for Service of Process, and having the agent sign the document on behalf of the MSB in Part VII, Authorized Signature/Signature of Agent for Service of Process.

The agent is required to hold the supporting documentation and agent list described in Part VI at the listed location on behalf of the foreign located MSB.

The agent signing on behalf of the foreign located MSB in Part VII certifies as follows: “I am authorized to file this form on behalf of the money services business listed in Part II. I declare that the information provided is true, correct and complete. I understand that the money services business listed in Part II is subject to the Bank Secrecy Act and its implementing regulations. The money services business listed in Part II maintains a current list of all agents, an estimate of its business volume in the coming year, and all other information required to comply with 31 U.S.C. 5330 and the regulations thereunder.”

**General:** The U.S. located registrant or the foreign located registrant’s U.S. agent for service of legal process must retain for five (5) years certain information at a location within the United States. That information includes:

Documents supporting the MSB’s existence may include:

1. A copy of the registration form.
2. Annual estimate of the volume of the registrant’s business in the coming year.
3. The following information regarding ownership or control of the business: the name and address of any shareholder holding more than 5% of the registrant’s stock, any general partner, any trustee, and/or any director or officer of the business.
4. An agent list.

If the registrant has agents it must prepare and maintain a list of its agents. That agent list must be updated annually and retained by the business at the location in the United States reported on this registration form in Part II or Part VI. The agent list **should not** be filed with this registration form.

The agent list must include:

- a. Each agent's name,
- b. Each agent's address,
- c. Each agent's telephone number,
- d. The type of service(s) provided by each agent on behalf of the registrant,
- e. A listing of the months in the immediately preceding 12 months in which the gross transaction amount of each agent with respect to financial products/services issued by the registrant exceeds \$100,000,
- f. The name and address of any depository institution at which each agent maintains a transaction account for the money services business activities conducted by the agent on behalf of the registrant,
- g. The year in which each agent first became an agent of the registrant, and
- h. The number of branches or subagents of each agent.

**Items 57 to 61**--If the supporting documentation is retained at a location other than the U.S. address listed in Part II, enter the location information in items 56 through 60. If the registrant is a foreign located MSB, enter the location of the registrant's U.S. agent for service of legal process, where the supporting documentation must be maintained.

#### **Part VII Authorized Signature/Signature of Agent for Service of Process**

**Items 62 to 65**--The U.S. owner or controlling person listed in Part III, or, in the case of a foreign located MSB, the U.S. agent for service of legal process, must sign and date the form as indicated in Part VII. If the owner or controlling person is a corporation, a duly authorized officer of the corporation must execute the form on behalf of the corporation. Enter the date this document was signed.

\*\*\*\*

**Penalties for failure to comply:** Any person who fails to comply with the requirements to register, keep records, and/or maintain agent lists pursuant to 31 CFR 1022.380 may be liable for civil penalties of up to \$5,000 for each violation. Failure to comply also may subject a person to criminal penalties, which may include imprisonment for up to five (5) years and criminal fines. See 18 USC 1960. **Note: This registration does not satisfy any state or local licensing or registration requirements.**

#### **Paperwork Reduction Act Notice.**

The purposes of this form are to provide an effective and consistent means for money services businesses to register with the Financial Crimes Enforcement Network, and to assure maintenance of reports or records where such reports or records have a high degree of usefulness in criminal, tax, or regulatory investigations or proceedings. This report is required by law, pursuant to authority contained in Public Law 103-305; 31 USC 5330; 5 USC 301; 31 CFR Chapter X. The information collected may be provided to those officers and employees of any constituent unit of the Department of the Treasury who have a need for the records in the performance of their duties. The records may be referred to any other department or agency of the United States, to any State, or Tribal Government. Public reporting and recordkeeping burden for this information collection is estimated to average 45 minutes per response, and

includes time to gather and maintain data for the required report, review the instructions, and complete the information collection. Send comments regarding this burden estimate, including suggestions for reducing the burden, to the Office of Management and Budget Paperwork Reduction Project, Washington, DC 20503 and to the Paperwork Reduction Act; Department of the Treasury, Financial Crimes Enforcement Network, P.O. Box 39, Vienna, VA 22183-0039. The agency may not conduct or sponsor, and an organization (or a person) is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

**Privacy Act Notice.**

Pursuant to the requirements of Public Law 93-579 (Privacy Act of 1974), notice is hereby given that, in accordance with 5 U.S.C. 552a(e), the authority to collect information on **FinCEN Report 107** is Public Law 103-305; 31 USC 5330; 5 USC 301; 31 CFR Chapter X. The Department of the Treasury may use and share the information with any other department or agency of the United States, to any State, or Tribal Government, or part thereof, upon the request of the head of such department or agency, or authorized State or Tribal Government official for use in a criminal, tax, or regulatory investigation or proceeding, and to foreign governments in accordance with an agreement, or a treaty. Disclosure of this information is mandatory. Civil and criminal penalties, including in certain circumstances a fine of not more than \$5,000 per day and imprisonment of not more than five years, are provided for failure to file the form, supply information requested by the form, and for filing a false or fraudulent form. Disclosure of the social security number or taxpayer identification number is mandatory. The authority to collect is 31 CFR Chapter X. The social security number/taxpayer identification number will be used as a means to identify the individual or entity who files the report.

[FR Doc. 2011-25607 Filed 10-5-11; 8:45 am]

BILLING CODE 4810-02-C

**DEPARTMENT OF VETERANS AFFAIRS**

**VASRD Improvement Forum—Updating Disability Criteria for the Respiratory System, Cardiovascular System, Hearing Impairment, and Ear, Nose and Throat Diseases**

**AGENCY:** Department of Veterans Affairs.  
**ACTION:** Notice of meeting.

**SUMMARY:** The Veterans Benefits Administration (VBA) and Veterans Health Administration (VHA) will co-host the Department of Veterans Affairs (VA) Schedule for Rating Disabilities (VASRD) Improvement Forum—Updating Disability Criteria for the Respiratory System, Cardiovascular System, Hearing Impairment, and Ear, Nose and Throat Diseases. The purpose of this VASRD Improvement Forum is to capture public comment and current medical science information from presentations made by subject matter experts. VA plans to use this information to update the sections of the VASRD that pertain to the following

four body systems: (1) Respiratory System (38 CFR 4.96–4.97), (2) the Cardiovascular System (38 CFR 4.100–4.104), (3) the Impairment of Auditory Acuity (38 CFR 4.85 and 4.86) and (4) Ear, Nose and Throat Diseases (38 CFR 4.87 and 4.97 currently under Schedule of Respiratory System). Specifically, diagnostic code descriptors and evaluation criteria will be discussed. Contingent upon available capacity and time, individuals wishing to make oral statements will be accommodated on a first-come, first-served basis.

**DATES:** The plenary session on Tuesday, October 11, 2011, will cover hearing impairment and diseases of the ear, nose and throat and auditory acuity. The plenary session on Thursday, October 13, 2011, will cover the respiratory system. The plenary session on Tuesday, October 18, 2011, will cover the cardiovascular system. All plenary sessions will be held at the VHA New York Harbor Health Care System, Manhattan Campus from 8:30 a.m.–4:30 p.m. Work group meetings for the corresponding VASRD systems will be held the day following the plenary sessions from 8:30–4:30 p.m. at the VBA New York Regional Office. The Auditory Acuity and Ear, Nose and

Throat Diseases Work Group meeting will take place on Wednesday, October 12, 2011, the Respiratory System Work Group will meet on Friday, October 14, 2011, and on Wednesday, October 19 and Thursday, October 20, 2011, the Cardiovascular Work Group will meet.

**ADDRESSES:** The plenary sessions will be held at the VHA New York Harbor Healthcare System, Manhattan Campus, located at 423 East 23 Street, New York, NY 10010, and the work group meetings will occur at the VBA New York Regional office located at 245 West Houston Street, New York, NY 10014.

**FOR FURTHER INFORMATION CONTACT:** Dr. Nick Olmos-Lau, M.D., Regulation Staff (211D), Compensation Service, Department of Veterans Affairs, 810 Vermont Avenue NW., Washington, DC 20420. Anyone wishing to attend these meetings or seeking additional information may also contact Dr. Olmos-Lau at (202) 461-9695 or [Nick.Olmos-Lau@va.gov](mailto:Nick.Olmos-Lau@va.gov).

Dated: September 29, 2011.

**John R. Gingrich,**  
*Chief of Staff, Department of Veterans Affairs.*

[FR Doc. 2011-25780 Filed 10-5-11; 8:45 am]

BILLING CODE 8320-01-P