

owned by the bank holding company, including the companies listed below.

The applications listed below, as well as other related filings required by the Board, are available for immediate inspection at the Federal Reserve Bank indicated. The applications will also be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing on the standards enumerated in the BHC Act (12 U.S.C. 1842(c)). If the proposal also involves the acquisition of a nonbanking company, the review also includes whether the acquisition of the nonbanking company complies with the standards in section 4 of the BHC Act (12 U.S.C. 1843). Unless otherwise noted, nonbanking activities will be conducted throughout the United States.

Unless otherwise noted, comments regarding each of these applications must be received at the Reserve Bank indicated or the offices of the Board of Governors not later than September 10, 2012.

A. Federal Reserve Bank of St. Louis (Glenda Wilson, Community Affairs Officer) P.O. Box 442, St. Louis, Missouri 63166–2034:

1. *Reliable Community Bancshares, Inc.*, Perryville, Missouri; to acquire 100 percent of the voting shares of First Southeast Missouri Bancorporation, Inc., Scott City, Missouri, and thereby indirectly acquire voting shares of Security Bank and Trust Company, Scott City, Missouri.

In connection with this application First Southeast Acquisition Corporation, Perryville, Missouri; has applied to become a bank holding company by acquiring 100 percent of the voting shares of First Southeast Missouri Bancorporation, Inc., and thereby indirectly acquire Security Bank and Trust Company, both in Scott City, Missouri.

Board of Governors of the Federal Reserve System, August 13, 2012.

Robert deV. Frierson,
Secretary of the Board.

[FR Doc. 2012–20166 Filed 8–16–12; 8:45 am]

BILLING CODE 6210–01–P

FEDERAL RESERVE SYSTEM

Formations of, Acquisitions by, and Mergers of Bank Holding Companies

The companies listed in this notice have applied to the Board for approval, pursuant to the Bank Holding Company Act of 1956 (12 U.S.C. 1841 *et seq.*) (BHC Act), Regulation Y (12 CFR part 225), and all other applicable statutes and regulations to become a bank holding company and/or to acquire the

assets or the ownership of, control of, or the power to vote shares of a bank or bank holding company and all of the banks and nonbanking companies owned by the bank holding company, including the companies listed below.

The applications listed below, as well as other related filings required by the Board, are available for immediate inspection at the Federal Reserve Bank indicated. The applications will also be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing on the standards enumerated in the BHC Act (12 U.S.C. 1842(c)). If the proposal also involves the acquisition of a nonbanking company, the review also includes whether the acquisition of the nonbanking company complies with the standards in section 4 of the BHC Act (12 U.S.C. 1843). Unless otherwise noted, nonbanking activities will be conducted throughout the United States.

Unless otherwise noted, comments regarding each of these applications must be received at the Reserve Bank indicated or the offices of the Board of Governors not later than September 13, 2012.

A. Federal Reserve Bank of Dallas (E. Ann Worthy, Vice President) 2200 North Pearl Street, Dallas, Texas 75201–2272:

1. *HaleCo Bancshares, Inc.*, Plainview, Texas; to acquire 100 percent of the voting shares of LubCo Bancshares, Inc., and thereby indirectly acquire Citizens Bank, both in Slaton, Texas.

Board of Governors of the Federal Reserve System, August 14, 2012.

Margaret McCloskey Shanks,
Associate Secretary of the Board.

[FR Doc. 2012–20210 Filed 8–16–12; 8:45 am]

BILLING CODE 6210–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day–12–12QC]

Proposed Data Collections Submitted for Public Comment and Recommendations

In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, the Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the

proposed projects or to obtain a copy of the data collection plans and instruments, call 404–639–7570 and send comments to Kimberly S. Lane, 1600 Clifton Road, MS–D74, Atlanta, GA 30333 or send an email to omb@cdc.gov.

Comments are invited 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) ways to enhance 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. Written comments should be received within 60 days of this notice.

Proposed Project

Costs and Cost Savings of Motor Vehicle Injury Prevention: Evidence-Based Policy and Behavioral Interventions—NEW—National Center for Injury Prevention and Control (NCIPC), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Motor vehicle injuries are the leading cause of death for children, adolescents, and young adults, and a major cause of death for all other ages. In 2009, 33,808 people were killed in crashes in the United States and more than 2.2 million people were injured. Medical costs and productivity losses associated with traffic injuries amounted to more than \$99 billion in 2005; equivalent to about \$500 for each U.S. licensed driver. Due to the magnitude of this injury problem and the availability of evidence-based policies and interventions to prevent it, motor vehicle injury prevention has been designated as one of the CDC's Winnable Battles.

CDC requests OMB approval to support research needed to reduce the number of motor vehicle injuries and fatalities. This project is designed to support state and local communities in making evidence-based resource allocation decisions relating to the implementation of motor vehicle injury prevention policies and programs. This will be done by generating estimates of the cost of implementing a set of evidence-based interventions. By combining these estimates with existing data on the effect of each intervention and cost of motor vehicle injuries, an interactive, user-friendly tool will be

created that states can use to assess the costs and benefits of different interventions designed to prevent motor vehicle injuries. The resulting tool should help states understand the tradeoffs and prioritize high-impact interventions to reduce motor vehicle injuries.

Key informant interviews will be used to fill gaps in knowledge for interventions that do not have extensive literature on their costs and benefits. Information will be collected from Public safety advocacy groups, DWI/DUI defense attorneys, State Departments of

Public Safety (members of the Governors Highway Safety Association), State Parole Agencies, and Local Law Enforcement Agencies. Online expert panel meetings will provide the background information needed to understand how to successfully build an online tool that can be used to generate a variety of state-specific and cost-benefit analyses, including point estimates and uncertainty intervals for costs and benefits. The tool will account for different levels of implementation for each intervention and for interdependencies among pairs of

specific interventions. The tool will provide state and local policymakers with an optimal portfolio or package of selected interventions that are expected to produce the highest benefit for a specified implementation budget. The integrated, data-driven tool will facilitate effective planning and policymaking at the state and local levels by providing policymakers with a rigorous analysis of the costs and benefits of various options for reducing motor vehicle injuries and fatalities.

There are no costs to respondents other than their time.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondent	Form name	Number of respondents	Number of responses per respondent	Average burden per response (hours)	Total burden hours
Public Safety Advocacy Groups	Semi-Structured Interviews—(Attachment C).	4	1	1	4
DWI/DUI Defense Attorneys	Semi-Structured Interviews—(Attachment D).	4	1	1	4
Court Case Managers	Semi-Structured Interviews—(Attachment E).	4	1	1	4
State Parole Agencies	Semi-Structured Interviews—(Attachment F).	2	1	1	2
State Depts. of Public Safety	Semi-Structured Interviews—(Attachment G).	6	1	1	6
Local Law Enforcement	Semi-Structured Interviews—(Attachment H).	4	1	1	4
Academic Researchers	Discussion Guide—Online Expert Panel—(Attachment I).	3	1	1	3
CDC Staff	Discussion Guide—Online Expert Panel—(Attachment I).	3	1	1	3
NHTSA Staff	Discussion Guide—Online Expert Panel—(Attachment I).	2	1	1	2
Total	32

Kimberly S. Lane,

Deputy Director, Office of Scientific Integrity,
Office of the Associate Director for Science,
Office of the Director, Centers for Disease
Control and Prevention.

[FR Doc. 2012–20218 Filed 8–16–12; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–12–12EX]

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) 639–7570 or send an email to omb@cdc.gov. Send written comments to CDC Desk Officer, Office of Management and Budget, Washington, DC 20503 or by fax to (202) 395–5806. Written comments should be received within 30 days of this notice.

Proposed Project

Formative Research for the Development of CDC's Act Against AIDS Social Marketing Campaigns Targeting Consumers—New—National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (NCHHSTP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The purpose of this study is to conduct interviews and focus groups in four rounds of data collections (exploratory research, message testing, concept testing, materials testing) with consumer groups aged 18 to 64 over a

3-year period to develop various social marketing campaigns aimed at increasing HIV testing rates, increasing HIV awareness and knowledge, challenging commonly held misperceptions about HIV, and promoting HIV prevention and risk reduction. The research results will be used to develop materials for six specific HIV social marketing campaigns under the umbrella of the larger *Act Against AIDS* campaign. The target audience for the campaigns include the following populations, all ages 18–64 years old: (1) General U.S. population, with an emphasis on African Americans and Latinos; (2) men who have sex with men (MSM), with an emphasis on Latino MSM; and (3) HIV+ individuals.

The study will screen 2338 people per year for eligibility. Of the 2338 people screened, it is expected that 500 people will participate in focus groups, 500 people will participate in in-depth interviews and 700 will participate in intercept interviews. All focus group