

concentration of resources, decreased or unfair competition, conflicts of interests, or unsound banking practices" (12 U.S.C. 1843). Any request for a hearing must be accompanied by a statement of the reasons a written presentation would not suffice in lieu of a hearing, identifying specifically any questions of fact that are in dispute, summarizing the evidence that would be presented at a hearing, and indicating how the party commenting would be aggrieved by approval of the proposal. 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 23, 1996.

A. Federal Reserve Bank of Atlanta (Zane R. Kelley, Vice President) 104 Marietta Street, N.W., Atlanta, Georgia 30303:

1. *Eberhardt, Inc.*, Elberton, Georgia; and JAM Family Partnership II, L.P., Elberton, Georgia, which is a second tier bank holding company subsidiary of Eberhardt, Inc.; to retain an additional 2.07 percent and prior approval to acquire an additional 1.37 percent of Pinnacle Financial Corporation, Elberton, Georgia, and thereby indirectly acquire First National Bank of Elberton, Elberton, Georgia, and Tri-County Bank of Royston, Royston, Georgia. Pro forma ownership will equal 25.24 percent.

In addition McConnell & Co., Elberton, Georgia, and JAM Family Partnership I, L.P., Elberton, Georgia, which is a second tier bank holding company subsidiary of McConnell and Co.; to acquire an additional 3.97 percent, for a total of 25.77 percent of the voting shares of Pinnacle Financial Corporation, Elberton, Georgia, and thereby indirectly acquire First National Bank in Elberton, Elberton, Georgia, and Tri-County Bank of Royston, Royston, Georgia.

B. Federal Reserve Bank of Minneapolis (Karen L. Grandstrand, Vice President) 250 Marquette Avenue, Minneapolis, Minnesota 55480:

1. *Taylor Bancshares, Inc.*, North Mankato, Minnesota; to acquire 16 percent of the voting shares of First National Bank of Fairfax, Fairfax, Minnesota.

C. Federal Reserve Bank of Dallas (Genie D. Short, Vice President) 2200 North Pearl Street, Dallas, Texas 75201-2272:

1. *Saint Jo Bancshares, Inc.*, Saint Jo, Texas; to become a bank holding company by acquiring 100 percent of

the voting shares of First Financial Company of Saint Jo, Dover, Delaware, and thereby indirectly acquire The First National Bank of Saint Jo, Saint Jo, Texas.

In connection with this application First Financial Company of Saint Jo, Dover, Delaware, also has applied to become a bank holding company.

Board of Governors of the Federal Reserve System, August 26, 1996.

William W. Wiles

Secretary of the Board

[FR Doc. 96-22178 Filed 8-29-96; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Commission on Dietary Supplement Labels; Notice of Meeting #5

AGENCY: Office of Disease Prevention and Health Promotion.

ACTION: Commission on Dietary Supplement Labels: Notice of Meeting #5.

SUMMARY: The Department of Health and Human Services (HHS) is providing notice of the fifth meeting of the Commission on Dietary Supplement Labels. The Commission intends to hold its meeting on September 19, 1996 from 8:30 a.m. to approximately 4:30 p.m. E.D.T., and September 20, 1996 from 8:30 a.m. to 3:00 p.m. E.D.T. in Room G at the Sheraton Reston Hotel, 11810 Sunrise Valley Drive, Reston, Virginia 22091. The meeting is open to the public; seating is limited.

FOR FURTHER INFORMATION CONTACT: Kenneth D. Fisher, Ph.D., Executive Director, Commission on Dietary Supplement Labels, Office of Disease Prevention and Health Promotion, Room 738G, Hubert H. Humphrey Building, 200 Independence Ave. SW., Washington, DC 20201, (202) 690-7102.

SUPPLEMENTARY INFORMATION: Public Law 103-417, Section 12, authorized the establishment of a Commission on Dietary Supplement Labels whose seven members have been appointed by the President. The appointments to the Commission by the President and the establishment of the Commission by the Secretary of Health and Human Services reflect the commitment of the President and the Secretary to the development of a sound and consistent regulatory policy on labeling of dietary supplements.

The Commission is charged with conducting a study and providing recommendations for regulation of label claims and statements for dietary supplements, including the use of

supplemental literature in connection with their sale and, in addition, procedures for evaluation of label claims. The Commission is expected to evaluate how best to provide truthful, scientifically valid, and non-misleading information to consumers in order that they may make informed health care choices for themselves and their families. The Commission's study report may include recommendations on legislation, if appropriate and necessary.

The Commission meeting agenda will include receipt and discussion of ad hoc Subcommittee reports, continuation of discussion of key issues related to labeling of dietary supplements, and identification of materials to be included in the Commission's forthcoming report.

The meeting is open to the public. If you will require a sign language interpreter, please call Sandra Saunders (202) 690-7102 by 4:30 p.m. E.D.T. on September 13, 1996.

Dated: August 26, 1996.

Linda D. Meyers,

Acting Deputy Director, Office of Disease Prevention and Health Promotion, U.S. Department of Health and Human Services.

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Centers for Disease Control and Prevention

[INFO-96-25]

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 the CDC Reports Clearance Officer on (404) 639-7090.

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 for other forms of information technology. Send comments to Wilma Johnson, CDC Reports Clearance Officer, 1600 Clifton Road, MS-D24, Atlanta, GA 30333. Written comments should be received within 60 days of this notice.

Proposed Projects

1. National Hospital Discharge Survey—(0920–0212)—Extension The National Hospital Discharge Survey (NHDS), which has been conducted continuously by the National Center for Health Statistics, CDC, since 1965, is the principal source of data on inpatient utilization of short-stay, non-Federal hospitals and is the only annual source of nationally representative estimates on the characteristics of discharges, the lengths of stay, diagnoses, surgical and

non-surgical procedures, and the patterns of use of care in hospitals in various regions of the country. It is the benchmark against which special programmatic data sources are compared. Data collected through the NHDS are essential for evaluating health status of the population, for the planning of programs and policy to elevate the health status of the Nation, for studying morbidity trends, and for research activities in the health field. NHDS data have been used extensively in the production of goals for the Year 2000 Health Objectives and the subsequent monitoring of these goals. In addition, NHDS data provide annual updates for numerous tables in the Congressionally-mandated NCHS report, *Health, United States*. Data for the

NHDS are collected annually on approximately 275,000 discharges from a nationally representative sample of noninstitutional hospitals, exclusive of Federal, military and Veterans' Administration hospitals. The data items collected are the basic core of variables contained in the Uniform Hospital Discharge Data Set (UHDDS). Data for approximately half of the responding hospitals are abstracted from medical records while the remainder of the hospitals supply data through commercial abstract service organizations, state data systems, in-house tapes or printouts. There is no actual cost to respondents since hospital staff who actively participate in the data collection effort are compensated by the government for their time.

Respondents	Number of respondents	Number of responses/respondent	Average burden/response (in hrs.)	Total burden (in hrs.)
Medical Record Abstracts Primary Procedure Hospitals	77	250	0.0833	1604
Alternate Procedure Hospitals	134	250	0.01666	558
In-House Tape or Printout Hospitals	103	12	0.18333	227
Update Form (Abstract Service Hospitals)	164	2	0.0333	11
Quality Control Forms	50	40	0.1666	33
Induction Forms	40	1	2	80
Total				2,513

Dated: August 26, 1996.

Wilma G. Johnson,

Acting Associate Director for Policy Planning And Evaluation, Centers for Disease Control and Prevention (CDC).

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Administration for Children and Families

Intent to Reallot Part C—Protection and Advocacy Funds to States for Developmental Disabilities Expenditures

AGENCY: Administration on Developmental Disabilities, Administration for Children and Families, Department of Health and Human Services.

ACTION: Notice of Intent to Reallot Fiscal Year 1996 Funds, pursuant to Section 125 and Section 142 of the Developmental Disabilities Assistance and Bill of Rights Act, as amended (Act).

SUMMARY: The Administration on Developmental Disabilities herein gives notice of intent to reallot funds which were set aside in accordance with Section 142(c)(5) of the Act. Of the \$806,682 which was set aside for technical assistance and Indian Consortiums, \$534,360 was utilized for technical assistance and \$136,161 was awarded to an Indian Consortium. Therefore, the balance of \$136,161 has been released for reallotment.

Any State or Territory which wishes to release funds or cannot use the

additional funds under Part C—Protection and Advocacy program for Fiscal Year 1996 should notify Joseph Lonergan, Director, Division of Formula, Entitlement and Block Grants, Office of Program Support, Administration for Children and Families, Department of Health and Human Services, 370 L'Enfant Promenade, S.W., Washington, D.C. 20447, in writing within thirty (30) days of the date of this promulgation. This notice is hereby given in accordance with Sections 125 and 142 of the Act.

FOR FURTHER INFORMATION CONTACT: Joseph Lonergan on (202) 401-6603.

The proposed reallotment for Part C—Protection and Advocacy program are set forth below:

ADMINISTRATION ON DEVELOPMENTAL DISABILITIES

[Fiscal Year 1996 Reallotment]

	Protection and Advocacy	Reallotment	Revised allotment
Alabama	\$443,606	\$2,328	\$445,934
Alaska	254,508	1,336	255,844
Arizona	339,119	1,780	340,899
Arkansas	257,788	1,353	259,141
California	2,180,763	11,437	2,192,200
Colorado	274,211	1,439	275,650