Innovation Catalogue. State staffers would input their innovative projects directly into the Catalogue using a predefined template. State input into the Catalogue would enrich the database with a larger and more diverse range of innovative projects. By sharing information on innovative approaches between the EPA and its State partners, both EPA and the States would benefit from using more cost-effective and creative techniques of environmental protection.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control numbers for EPA's regulations in 40 CFR are listed in 40 CFR part 9.

The EPA would like to solicit comments to:

(i) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the Agency, including whether the information will have practical utility;

(ii) Evaluate the accuracy of the Agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;

(iii) Enhance the quality, utility, and clarity of the information to be collected; and

(iv) Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated electronic, mechanical, or other technological collection techniques or other forms of information technology, *e.g.*, permitting electronic submission of responses.

Burden Statement: EPA estimates that each State will submit 15 entries to the Innovation Catalogue per year. We have derived this estimate from our discussions with Innovation Coordinators in the Regions. Each entry will take approximately one hour. We anticipate that each State will revise and update its entry twice a year, which will also take an hour. Average State salaries were obtained from the the Bureau of Labor Statistics' *Employer Costs for Employee Compensation* (ECEC) data from December 2002. The calculations summarizing these estimates follow in the table below.

TABLE 1.1.—SUMMARY OF ANNUALIZED RESPONDENT BURDEN, JANUARY 1, 2004–DECEMBER 31, 2007

	Facility/state burden hours [1]	Facility burden cost [2]	Total burden hours [3]	Total burden cost
State Submissions to the Catalogue				
New Submissions for Consideration	30	$37.47	1500	$56,205.00
Revising Published Submissions	30	37.47	1500	56,205.00
Summary:				
Total Respondent Burden, 2004–2007	180	37.47	9000	337,230.00
Annualized Total Respondent Burden	60	37.47	3000	112,410.00

[1] EPA estimates burden hours by assuming each State will submit 15 new entries per year, with each new submission requiring 2 hours. EPA estimates that each State will submit a revision of each submission every six months, and revisions will only require 1 hour.

[2] EPA estimates hourly non-EPA labor rates from several sources. For State Government and Respondent wages, EPA uses the Bureau of Labor Statistics' *Employer Costs for Employee Compensation* (ECEC) data from December 2002 (*http://www.bls.gov/news.release/ecec.t04.htm* and *http://www.bls.gov/news.release/ecec.t12.htm,* respectively). Consistent with the Office of Management and Budget's 1999 guidance *Estimating Paperwork Burden* (*http://www.whitehouse.gov/omb/fedreg/5cfr1320.html*), EPA uses an adjusted labor rate reflective of benefits and overhead costs.

[3] Calculated by multiplying the Facility Burden Hours by the Number of Facilities/States.

[4] Calculated by multiplying the Total Burden Hours by the Facility Burden Cost.

Dated: March 1, 2004.

Elizabeth A. Shaw,

Director, Office of Environmental Policy Innovation.

[FR Doc. 04–5765 Filed 3–12–04; 8:45 am]

BILLING CODE 6560–50–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Public Meeting of the President's Council on Bioethics on April 1–2, 2004

AGENCY: The President's Council on Bioethics, HHS.

ACTION: Notice.

SUMMARY: The President's Council on Bioethics (Leon R. Kass, M.D., chairman) will hold its sixteenth meeting, at which, among other things, it will release a report on the regulation of biotechnologies touching the beginnings of human life; continue its discussion of neuroethics; and begin discussing ethical issues relating to dementia and end-of-life care. Guest presenters will include neuroscientists Fred Gage of the Salk Institute; Thomas Jessell of Columbia University; and Jerome Kagan and Elizabeth Spelke of Harvard University. Subjects discussed at past Council meetings (and potentially touched on at this meeting) include: embryo research, assisted reproduction, reproductive genetics, IVF, ICSI, PGD, sex selection, inheritable genetic modification, patentability of human organisms, aging retardation, lifespan-extension, and organ procurement for transplantation. Publications issued by the Council to date include: Human Cloning and Human Dignity: An Ethical Inquiry (July 2002); Beyond Therapy: Biotechnology and the Pursuit of Happiness (October 2003); Being Human: Readings from the President's Council on Bioethics (December 2003); and Monitoring Stem Cell Research (January 2004).

DATES: The meeting will take place Thursday, April 1, 2004, from 9 a.m. to 5:15 p.m. e.t.; and Friday, April 2, 2004, from 8:30 a.m. to 12:30 p.m. e.t.

ADDRESSES: Hyatt Regency Crystal City at Reagan National Airport, 2799 Jefferson Davis Highway, Arlington, VA 22202.

Agenda: The meeting agenda will be posted at *http://www.bioethics.gov.*

Public Comments: The Council encourages public input, either in person or in writing. At this meeting, interested members of the public may address the Council, beginning at 11:30 a.m., on Friday, April 2. Comments are limited to no more than five minutes per speaker or organization. As a courtesy, please inform Ms. Diane Gianelli, Director of Communications, in advance of your intention to make a public statement, and give your name and affiliation. To submit a written statement, mail or e-mail it to Ms. Gianelli at one of the addresses given below.

FOR FURTHER INFORMATION CONTACT: Ms. Diane Gianelli, Director of Communications, The President's Council on Bioethics, Suite 700, 1801 Pennsylvania Avenue, Washington, DC

20006. Telephone: 202/296–4669. E-mail: *info@bioethics.gov*. Web site: *http://www.bioethics.gov*.

Dated: March 8, 2004.

Dean Clancy,

Executive Director, The President's Council on Bioethics.

[FR Doc. 04–5714 Filed 3–12–04; 8:45 am]

BILLING CODE 4150–24–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration on Aging

Agency Information Collection Activities; Submission for OMB Review; Comment Request; AoA Uniform Project Description

AGENCY: Administration on Aging, HHS.

ACTION: Notice.

SUMMARY: The Administration on Aging (AoA) is announcing that the proposed collection of information listed below has been submitted to the Office of Management and Budget (OMB) for review and clearance under the Paperwork Reduction Act of 1995.

DATES: Submit written comments on the collection of information by April 14, 2004.

ADDRESSES: Submit written comments on the collection of information by fax (202) 395.6974 or by mail to the Office of Information and Regulatory Affairs, OMB, New Executive Office Bldg., 725 17th St. NW., rm. 10235, Washington, DC 20503, Attn: Brenda Aguilar, Desk Officer for AoA.

FOR FURTHER INFORMATION CONTACT: Margaret Tolson, (202) 357–3440, *margaret.tolson@aoa.gov*.

SUPPLEMENTARY INFORMATION: In compliance with 44 U.S.C. 3507, AoA has submitted the following proposed collection of information to OMB for review and clearance.

The proposed collection relates to discretionary grant applicants' project description and budget justification information necessary to issue AoA discretionary grants. The information is used to evaluate if applications are eligible for funding and further used during the grant review process. The respondents are organizations that choose to apply for an AoA discretionary grant. AoA estimates the burden of this collection of information as follows: 500 responses/year; 5,000 hours/year.

Dated: March 10, 2004.

Josefina G. Carbonell,

Assistant Secretary for Aging.

[FR Doc. 04–5791 Filed 3–12–04; 8:45 am]

BILLING CODE 4154–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day–04–31]

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) 498–1210.

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. Send comments to Seleda Perryman, CDC Assistant Reports Clearance Officer, 1600 Clifton Road, MS-E11, Atlanta, GA 30333. Written comments should be received within 60 days of this notice.

Proposed Project—Brownsville-Matamoros Sister City Project (BMSCP) for Women's Health—New—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC). The Brownsville-Matamoros Sister City Project for Women's Health is a proposed pilot project in which a standardized approach to surveillance will be established in selected hospitals that provide obstetric services in Brownsville and Harlingen, Texas, U.S., and Matamoros, Tamaulipas, Mexico.

During 2003 and 2004, CDC provided funds to support staff from CDC, NCDDPHP, the University of Texas at Brownsville/Texas Southmost College, the University of Texas—Houston School of Public Health, and Helix, Inc. These funds were used to disseminate information or inform health practitioners and public health officials at the local, state and national level about the BMSCP, implement development of the methodology and data collection instruments for the pilot phase of data collection described herein, conduct discussion groups (currently ongoing) to determine the appropriate language for interviews, and to determine the acceptability of topic areas to be covered in the interviews, and the appropriateness of the proposed methodology.

The purpose of the proposed data collection is to test a standardized approach for hospital-based surveillance of women's health and chronic disease issues in the US-Mexico border communities of Brownsville and Harlingen, Texas, and Matamoros, Tamaulipas, Mexico. The primary method of data collection will be in-person interviews with women who give birth to live infants; which may be supplemented by abstracting additional data from the medical records of respondents and birth certificates of their infants. The majority of interviews will take place after delivery but prior to hospital discharge.

Women who are selected for the pilot project but discharged prior to interview will be interviewed at the clinic they attend for postnatal care. The questionnaire will include questions to help monitor the occurrence of and risk factors for adolescent pregnancy, infant mortality, and gestational diabetes, as well as questions about physical activity and dietary practices, cervical cancer screening history, and knowledge of HIV transmission and prevention. These issues have been established as priorities by the U.S.-Mexico Binational Health Commission (USMBHC) and are included in the Healthy Border 2010 objectives of the USMBHC. This approach to surveillance through which data will be collected using a standardized and uniform methodology on the U.S. and Mexican sides of the US-Mexico border is needed.

Most data collection systems currently in place have been designed to collect information from either U.S. or Mexican residents, and the methodology of such systems is not comparable. Persons living along the US-Mexico border frequently cross the border in both directions for healthcare, work, and social reasons, they represent a unique population with respect to public health needs and public health