

acquire or control voting securities or assets of a company, including the companies listed below, that engages either directly or through a subsidiary or other company, in a nonbanking activity that is listed in section 225.28 of Regulation Y (12 CFR 225.28) or that the Board has determined by Order to be closely related to banking and permissible for bank holding companies. Unless otherwise noted, these activities will be conducted throughout the United States.

Each notice is available for inspection at the Federal Reserve Bank indicated. The notice also will be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing on the question whether the proposal complies with the standards of section 4 of the BHC Act.

Unless otherwise noted, comments regarding the applications must be received at the Reserve Bank indicated or the offices of the Board of Governors not later than April 21, 2015.

A. Federal Reserve Bank of Philadelphia (William Lang, Senior Vice President) 100 North 6th Street, Philadelphia, Pennsylvania 19105–1521:

1. *The Bancorp, Inc.*, Wilmington, Delaware; to retain 49 percent of the voting shares of Walnut Street 2014-Issuer, LLC, Gladwyne, Pennsylvania, and thereby engage in extending credit and servicing loans, pursuant to section 225.28(b)(1).

Board of Governors of the Federal Reserve System, April 1, 2015.

Michael J. Lewandowski,
Associate Secretary of the Board.

[FR Doc. 2015–07791 Filed 4–3–15; 8:45 am]

BILLING CODE 6210–01–P

GENERAL SERVICES ADMINISTRATION

[Notice–MA–2015–01; Docket No. 2015–0002, Sequence No. 5]

Federal Travel Regulation (FTR); Relocation Allowances—Relocation Income Tax (RIT) Allowance Tables

AGENCY: Office of Government-wide Policy, U.S. General Services Administration (GSA).

ACTION: Notice of a bulletin.

SUMMARY: The purpose of this notice is to inform agencies that FTR Bulletin 15–03 pertaining to Relocation Allowances—Relocation Income Tax (RIT) Allowance Tables is now available online at www.gsa.gov/ftrbulletin.

DATES: Effective: April 6, 2015.

FOR FURTHER INFORMATION CONTACT: Mr. Rick Miller, Office of Asset and Transportation Management (MA), Office of Government-wide Policy, GSA, at 202–501–3822 or via email at rodneymiller@gsa.gov. Please cite FTR Bulletin 15–03.

SUPPLEMENTARY INFORMATION: The GSA published FTR Amendment 2008–04 in the **Federal Register** at 73 FR 35952 on June 25, 2008, specifying that GSA would no longer publish the RIT Allowance tables in Title 41 of the Code of Federal Regulation Part 302–17, Appendices A through D; instead, the tables would be available on a GSA Web site. FTR Bulletin 15–03: Relocation Allowances—Relocation Income Tax (RIT) Allowance Tables is now available and provides the annual changes to the RIT allowance tables necessary for calculating the amount of a transferee's increased tax burden due to his or her official permanent change of station. FTR Bulletin 15–03 and all other FTR Bulletins can be found at www.gsa.gov/ftrbulletin.

Dated: March 30, 2015.

Giancarlo Brizzi,

Acting Associate Administrator, Office of Government-wide Policy.

[FR Doc. 2015–07866 Filed 4–3–15; 8:45 am]

BILLING CODE 6820–14–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Eunice Kennedy Shriver National Institute of Child Health and Human Development; Notice of Closed Meetings

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is hereby given of the following meetings.

The meetings will be closed to the public in accordance with the provisions set forth in section 552b(c)(4) and 552b(c)(6), title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: Eunice Kennedy Shriver National Institute of Child Health and Human Development Special Emphasis Panel; Academic-Community Partnership Conference Series (R13).

Date: April 13, 2015.

Time: 9:00 a.m. to 6:00 p.m.

Agenda: To review and evaluate grant applications.

Place: Renaissance M Street Hotel, 1143 New Hampshire Avenue NW., Washington, DC 20037.

Contact Person: Marita R. Hopmann, Ph.D., Scientific Review Officer, Scientific Review Branch, Eunice Kennedy Shriver National Institute of Child Health and Human Development, NIH, 6100 Executive Boulevard, Room 5B01, Bethesda, MD 20892–9304, (301) 435–6911, hopmannm@mail.nih.gov.

This notice is being published less than 15 days prior to the meeting due to the timing limitations imposed by the review and funding cycle.

(Catalogue of Federal Domestic Assistance Program Nos. 93.864, Population Research; 93.865, Research for Mothers and Children; 93.929, Center for Medical Rehabilitation Research; 93.209, Contraception and Infertility Loan Repayment Program, National Institutes of Health, HHS)

Dated: March 31, 2015.

Michelle Trout,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2015–07741 Filed 4–3–15; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Solicitation of Written Comments on the Human Papillomavirus Working Group's Draft Report and Draft Recommendations for Improving Vaccination Rates in Adolescents for Consideration by the National Vaccine Advisory Committee

AGENCY: National Vaccine Program Office, Office of the Assistant Secretary for Health, Office of the Secretary, Department of Health and Human Services.

ACTION: Notice.

SUMMARY: The National Vaccine Advisory Committee (NVAC) was established in 1987 to comply with Title XXI of the Public Health Service Act (Pub. L. 99–660) (§ 2105) (42 U.S. Code 300aa–5 (PDF—78 KB)). Its purpose is to advise and make recommendations to the Director of the National Vaccine Program on matters related to program responsibilities. The Assistant Secretary for Health (ASH) has been designated by the Secretary of Health and Human Services (HHS) as the Director of the National Vaccine Program. The National Vaccine Program Office (NVPO) is located within the Office of the Assistant Secretary for Health (OASH), Office of the Secretary, U.S. Department of Health and Human Services (HHS). NVPO provides leadership and fosters collaboration among the various federal

agencies involved in vaccine and immunization activities. The NVPO also supports the National Vaccine Advisory Committee (NVAC). The NVAC advises and makes recommendations to the ASH in her capacity as the Director of National Vaccine Program on matters related to vaccine program responsibilities.

In February 2013, the NVAC created a working group to review the current state of HPV immunization, to understand the root cause(s) for the observed low vaccine uptake, both in initiation and in series completion, and to identify existing best practices to increase the use of the HPV vaccine in young adolescents.

Through a series of teleconferences, electronic communications, and public discussions during the NVAC meetings, a working group identified a number of draft recommendations categorized into five priority areas of opportunity for improving vaccination coverage among adolescents. The draft report and draft recommendations from the working group will inform NVAC deliberations as the NVAC finalizes their recommendations for transmittal to the ASH.

On behalf of NVAC, NVPO is soliciting public comment on the draft report and draft recommendations from a variety of stakeholders, including the general public. Comments will be considered by the NVAC as it develops its final recommendations to the ASH. It is anticipated that the draft report and draft recommendations, as revised with consideration given to public comment and stakeholder input, will be presented to the NVAC for discussion and adoption in NVAC meeting in June 2015.

DATES: Comments for consideration by the NVAC should be received no later than 5:00 p.m. EDT on May 6, 2015.

ADDRESSES:

(1) The draft report and draft recommendations are available on the web at <http://www.hhs.gov/nvpo/nvac/subgroups/nvac-hpv-wg.html>.

(2) Electronic responses are preferred and may be addressed to: HPVwg@hhs.gov.

(3) Written responses should be addressed to: National Vaccine Program Office, U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 715H, Washington, DC 20201. Attn: HHS HPV Immunizations.

FOR FURTHER INFORMATION CONTACT: National Vaccine Program Office, Office of the Assistant Secretary for Health, Department of Health and Human

Services; telephone (202) 690-5566; fax (202) 690-4631; email: HPVwg@hhs.gov.

SUPPLEMENTARY INFORMATION:

I. Background

There are an average of 25,900 newly diagnosed cases per year of human papillomavirus (HPV)-associated cancer in the United States. An estimated 14 million people are newly infected with HPV each year and nearly half of these infections occur in people between the ages of 14–25 years. While most infections resolve over time, persistent infection with oncogenic HPV types is associated with a variety of cancers. Virtually all cervical cancers are due to HPV along with 90 percent of anal, 69 percent of vaginal, 60 percent of oropharyngeal, 51 percent of vulvar, and 40 percent of penile cancers. Further, 87 percent of anal, 76 percent of cervical, 60 percent of oropharyngeal, 55 percent of vaginal, 44 percent of vulva and 29 percent of penile cancers are caused by oncogenic HPV types 16 or 18. Of the 35,000 HPV cancers reported in 2009 in the U.S., 39 percent occurred in males.

Through their analysis and discussion, the NVAC identified five major areas of opportunity:

(1) Endorsing the President's Cancer Panel (PCP) report, Accelerating HPV Vaccine Uptake: Urgency for Action to Prevent Cancer, and adopt the recommendations outlined therein.

(2) Monitoring "the status of uptake and implementation of the recommendations" through an annual progress report from HPV vaccination stakeholders identified in the PCP report.

(3) Working with relevant agencies and stakeholders to develop evidence-based, effective, coordinated communication strategies to increase the strength and consistency of clinician recommendations for HPV vaccination to adolescents (both males and females) in the recommended age groups and to improve acceptance among parents/guardians, adolescents and young adults.

(4) Working with the relevant agencies and stakeholders to strengthen the immunization system in order to maximize access to and support of adolescent vaccinations, including HPV vaccines.

(5) Encouraging the review or development of available data that could lead to a simplified HPV vaccination schedule. In addition to a review that could impact existing vaccines, manufacturers of HPV vaccines in development should also consider opportunities to support the simplest HPV immunization schedule

while maintaining vaccine effectiveness, safety, and long-term protection.

II. Request for Comment

NVPO, on behalf of the NVAC HPV Working Group, requests input on the draft report and draft recommendations. In addition to general comments on the draft report and draft recommendations, NVPO is seeking input on efforts or barriers to HPV immunization not represented in the report where HHS efforts could advance adolescent immunization efforts. Please limit your comments to six (6) pages.

III. Potential Responders

HHS invites input from a broad range of stakeholders including individuals and organizations that have interests in HPV immunization efforts and the role of HHS in advancing those efforts.

Examples of potential responders include, but are not limited to, the following:

- General public;
- advocacy groups, non-profit organizations, and public interest organizations;
- academics, professional societies, and healthcare organizations;
- public health officials and immunization program managers;
- adolescent provider groups including all physician and non-physician providers that administer healthcare services to adolescents, including pharmacists; and
- representatives from the private sector.

When responding, please self-identify with any of the above or other categories (include all that apply) and your name. Anonymous submissions will not be considered. Written submissions should not exceed six (6) pages. Please do not send proprietary, commercial, financial, business, confidential, trade secret, or personal information.

Dated: March 20, 2015.

Bruce Gellin,

Deputy Assistant Secretary for Health, Director, National Vaccine Program Office, Executive Secretary, National Vaccine Advisory Committee.

[FR Doc. 2015-07777 Filed 4-3-15; 8:45 am]

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