**ACTION:** Notice of request for public comments regarding an extension to an existing OMB clearance (9000–0152).

SUMMARY: Under the provisions of the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35), the Federal Acquisition Regulation (FAR), Regulatory Secretariat will be submitting to the Office of Management and Budget (OMB) a request to review and approve an extension of a currently approved information collection requirement concerning service contracting. This OMB clearance expires on July 31, 2009.

Public comments are particularly invited on: Whether this collection of information is necessary for the proper performance of functions of the FAR, and whether it will have practical utility; whether our estimate of the public burden of this collection of information is accurate, and based on valid assumptions and methodology; ways to enhance the quality, utility, and clarity of the information to be collected; and ways in which we can minimize the burden of the collection of information on those who are to respond, through the use of appropriate technological collection techniques or other forms of information technology. **DATES:** Submit comments on or before June 23, 2009.

ADDRESSES: Submit comments, including suggestions for reducing this burden to the General Services Administration, Regulatory Secretariat (VPR), 1800 F Street, NW., Room 4041, Washington, DC 20405.

**FOR FURTHER INFORMATION CONTACT:** Mr. Warren Blankenship, Contract Policy Division, GSA, (202) 501–1900.

#### SUPPLEMENTARY INFORMATION:

### A. Purpose

This FAR requirement implements the statutory requirements of Sec. 834, Public Law 101-510, concerning uncompensated overtime. The coverage requires that offerors identify uncompensated overtime hours and the uncompensated overtime rate for direct charge Fair Labor Standards Act-exempt personnel. These overtime hours and rates are included in the offeror's proposals and their subcontractors' proposals for procurements valued at or above the simplified acquisition threshold. This permits Government contracting officers to ascertain cost realism of proposed labor rates for professional employees.

### **B.** Annual Reporting Burden

Number of Respondents: 19,906. Responses per Respondent: 1.

Annual Responses: 19,906. Average Burden per Response: 30 minutes.

Total Burden Hours: 9,953.
Obtaining Copies of Proposals:
Requesters may obtain a copy of the information collection documents from the General Services Administration,
Regulatory Secretariat (VPR), Room
4041, Washington, DC 20405, telephone
(202) 501–4755. Please cite OMB
Control No. 9000–0152, Service
Contracting, in all correspondence.

Dated: April 17, 2009.

#### Al Matera,

Director, Office of Acquisition Policy.
[FR Doc. E9–9459 Filed 4–23–09; 8:45 am]
BILLING CODE 6820–EP–P

### **DEPARTMENT OF DEFENSE**

# GENERAL SERVICES ADMINISTRATION

# NATIONAL AERONAUTICS AND SPACE ADMINISTRATION

[OMB Control No. 9000-0145]

Federal Acquisition Regulation; Information Collection; Use of Data Universal Numbering System (DUNS) as Primary Contractor Identification

**AGENCY:** Department of Defense (DOD), General Services Administration (GSA), and National Aeronautics and Space Administration (NASA).

**ACTION:** Notice of request for public comments regarding an extension to an existing OMB clearance (9000–0145).

SUMMARY: Under the provisions of the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35), the Federal Acquisition Regulation (FAR), Regulatory Secretariat will be submitting to the Office of Management and Budget (OMB) a request to review and approve an extension of a currently approved information collection requirement concerning use of data universal numbering system (DUNS) as primary contractor identification. This OMB clearance expires on August 31, 2009.

Public comments are particularly invited on: Whether this collection of information is necessary for the proper performance of functions of the FAR, and whether it will have practical utility; whether our estimate of the public burden of this collection of information is accurate, and based on valid assumptions and methodology; ways to enhance the quality, utility, and clarity of the information to be collected; and ways in which we can

minimize the burden of the collection of information on those who are to respond, through the use of appropriate technological collection techniques or other forms of information technology.

**DATES:** Submit comments on or before June 23, 2009.

ADDRESSES: Submit comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to the General Services Administration, Regulatory Secretariat (VPR), 1800 F Street, NW., Room 4041, Washington, DC 20405.

**FOR FURTHER INFORMATION CONTACT:** Mr. Ernest Woodson, Contract Policy Division, GSA, (202) 501–3775.

#### SUPPLEMENTARY INFORMATION:

#### A. Purpose

The Data Universal Numbering System (DUNS) number is the nine-digit identification number assigned by Dun and Bradstreet Information Services to an establishment. The Government uses the DUNS number to identify contractors in reporting to the Federal Procurement Data System (FPDS). The FPDS provides a comprehensive mechanism for assembling, organizing, and presenting contract placement data for the Federal Government. Federal agencies report data on all contracts in excess of the micro-purchase threshold to the Federal Procurement Data Center which collects, processes, and disseminates official statistical data on Federal contracting. Contracting officers insert the Federal Acquisition Regulation (FAR) provision at 52.204-6, Data Universal Numbering System (DUNS) Number, in solicitations they expect will result in contracts in excess of the micro-purchase threshold and do not contain FAR 52.204-7, Central Contractor Registration. This provision requires offerors to submit their DUNS number with their offer. If the offeror does not have a DUNS number, the provision provides instructions on obtaining one.

# **B.** Annual Reporting Burden

Respondents: 35,694.
Responses per Respondent: 4.00.
Annual Responses: 142,776.
Hours per Response: .0200.
(Averaged.)

Total Burden Hours: 2,852.
Obtaining Copies of Proposals:
Requesters may obtain a copy of the information collection documents from the General Services Administration,
Regulatory Secretariat (VPR), Room
4041, Washington, DC 20405, telephone
(202) 501–4755. Please cite OMB
Control No. 9000–0145, Use of Data

Universal Numbering System (DUNS) as Primary Contractor Identification, in all correspondence.

Dated: April 17, 2009.

#### Al Matera,

Director, Office of Acquisition Policy. [FR Doc. E9–9457 Filed 4–23–09; 8:45 am]

BILLING CODE 6820-EP-P

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

[Document Identifier: OS-0990-0302]

# Agency Information Collection Request. 60-Day Public Comment Request

AGENCY: Office of the Secretary, HHS. In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Office of the Secretary (OS), Department of Health and Human Services, is publishing the following summary of a proposed information collection request for public comment. Interested persons are invited to send comments regarding this burden estimate or any other aspect

of this collection of information, including any of the following subjects: (1) The necessity and utility of the proposed information collection for the proper performance of the agency's functions; (2) the accuracy of the estimated burden; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) the use of automated collection techniques or other forms of information technology to minimize the information collection burden.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, e-mail your request, including your address, phone number, OMB number, and OS document identifier, to

Sherette.funncoleman@hhs.gov, or call the Reports Clearance Office on (202) 690–6162. Written comments and recommendations for the proposed information collections must be directed to the OS Paperwork Clearance Officer at the above e-mail address within 60-days.

*Proposed Project:* Medical Reserve Corps Unit Profile and Reports

(Extension)—OMB No. 0990–0302—Office of the Secretary/Office of Public Health and Science/Office of the Surgeon General/Office of the Civilian Volunteer Medical Reserve Corps (OS/OPHS/OSG/OCVMRC).

Abstract: Medical Reserve Corps units are currently located in over 800 communities across the United States, and represent a resource of more than 170,000 volunteers. In order to continue supporting the MRC units in communities across the United States, and to continue planning for future emergencies that are national in scope, detailed information about the MRC units, including unit demographics, contact information (regular and emergency), volunteer numbers, and information about activities is needed by the Office of the Civilian Volunteer Medical Reserve Corps (OCVMRC). MRC Unit Leaders are asked to update this information on the MRC Web site at least quarterly, and to participate in a Technical Assistance Assessment at least annually. The MRC unit data collected has not changed. This OMB extension request is for 3 years.

# ESTIMATED ANNUALIZED BURDEN TABLE

Type of respondent	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
MRC Unit Leader	803	6	1.0	4,818

### Seleda Perryman,

Paperwork Reduction Act Reports Clearance Officer, Office of the Secretary.

[FR Doc. E9–9420 Filed 4–23–09; 8:45 am] **BILLING CODE 4150–47–P** 

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

# Agency for Healthcare Research and Quality

### Agency Information Collection Activities: Proposed Collection; Comment Request

**AGENCY:** Agency for Healthcare Research and Quality, HHS.

**ACTION:** Notice.

**SUMMARY:** This notice announces the intention of the Agency for Healthcare Research and Quality (AHRQ) to request that the Office of Management and Budget (OMB) approve the proposed information collection under the project: "Evaluation of AHRQ's Effective Health Care Program." In accordance with the Paperwork Reduction Act of

1995, Public Law 104–13 (44 U.S.C. 3506(c)(2)(A)), AHRQ invites the public to comment on this proposed information collection.

**DATES:** Comments on this notice must be received by June 23, 2009.

**ADDRESSES:** Written comments should be submitted to: Doris Lefkowitz, Reports Clearance Officer, AHRQ, by email at *doris.lefkowitz@ahrg.hhs.gov*.

Copies of the proposed collection plans, data collection instruments, and specific details on the estimated burden can be obtained from the AHRQ Reports Clearance Officer.

### FOR FURTHER INFORMATION CONTACT:

Doris Lefkowitz, AHRQ Reports Clearance Officer, (301) 427–1477, or by e-mail at *doris.lefkowitz@ahrg.hhs.gov*.

### SUPPLEMENTARY INFORMATION:

### **Proposed Project**

"Evaluation of AHRQ's Effective Health Care Program"

AHRQ proposes to perform an evaluation of the Effective Health Care (EHC) program's governance structure, methods for engaging stakeholders and

approaches to setting national research priorities. Pursuant to Section 1013 of the Medicare Prescription Drug, Improvement, and Modernization Act of 2003, Pub. L. 108-173, the EHC program was established by AHRQ to conduct research, demonstrations, and evaluations designed to improve the quality, effectiveness, and efficiency of Medicare, Medicaid, and the State Children's Health Insurance Program. The EHC program was designed to provide effectiveness and comparative effectiveness evidence of medical treatments, therapeutics, devices and drugs to assist policymakers, health care providers, clinicians, consumers, and other stakeholders in making informed decisions. The EHC program has offered a platform for combining explicit reviews of scientific evidence on the clinical effectiveness of pharmaceuticals and other health care interventions, as well as the translation and dissemination of scientific findings into meaningful messages for a wide variety of audiences. It serves as an interface between the clinical research entities and health policy making entities. This