and analyzed in connection with NMTC evaluation efforts.

Current Actions: Extension of a currently approved collection.

Type of review: Regular review. Affected Public: Business or other forprofit institutions, not-for-profit institutions, and State, local and Tribal entities.

Estimated Number of Respondents: 495.

Estimated Annual Time per Respondent: 12 hours.

Estimated Total Annual Burden Hours: 5,940 hours.

Requests for Comments: Comments submitted in response to this notice will be summarized and/or included in the request for OMB approval. All comments will become a matter of public record. The specific section of the allocation agreement for which comments are sought is the reporting requirement that allocatees provide notice to the CDFI Fund, through the CDFI Fund's allocation tracking system, of the receipt of a Qualified Equity Investment. Comments are invited on: (a) Whether the 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 collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; (d) ways to minimize the burden of the collection of information on respondents, including through the use of technology; and (e) estimates of capital or start-up costs and costs of operation, maintenance, and purchase of services required to provide information.

**Authority:** 12 U.S.C. 4701 *et seq.*; 26 U.S.C. 45D.

Dated: February 19, 2010.

## Jeffrey C. Berg,

Legal Counsel, Community Development Financial Institutions Fund.

[FR Doc. 2010–3900 Filed 2–26–10; 8:45 am]

BILLING CODE 4810-70-M

## **DEPARTMENT OF THE TREASURY**

### Office of Thrift Supervision

[AC-35: OTS No. H-4649]

# Harvard Illinois Bancorp, Inc., Harvard, Illinois; Approval of Conversion Application

Notice is hereby given that on February 12, 2010, the Office of Thrift Supervision approved the application of Harvard Savings Bank, Harvard, Illinois, to convert to the stock form of organization. Copies of the application are available for inspection by appointment (phone number: 202–906–5922 or e-mail *Public.Info@ OTS.Treaas.gov*) at the Public Reading Room, 1700 G Street, NW., Washington, DC 20552, and the OTS Central Regional Office, 1 South Wacker Drive, Suite 2000, Chicago, Illinois 60606.

Dated: February 19, 2010.

By the Office of Thrift Supervision.

#### Sandra E. Evans,

Federal Register Liaison.

[FR Doc. 2010-3897 Filed 2-26-10; 8:45 am]

BILLING CODE 6720-01-M

# DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900-0219]

# Proposed Information Collection (Application for CHAMPVA Benefits); Comment Request

**AGENCY:** Veterans Health Administration, Department of Veterans Affairs.

**ACTION:** Notice.

**SUMMARY:** The Veterans Health Administration (VHA), Department of Veterans Affairs (VA), is announcing an opportunity for public comment on the proposed collection of certain information by the agency. Under the Paperwork Reduction Act (PRA) of 1995, Federal agencies are required to publish notice in the Federal Register concerning each proposed collection of information, including each proposed extension of a currently approved collection, and allow 60 days for public comment in response to the notice. This notice solicits comments for information needed to determine eligibility of persons applying for healthcare benefits under Civilian Health and Medical Program-VA and to request preauthorization of certain health care services and benefits for children of Vietnam veterans born with spina bifida and certain other covered birth defects.

**DATES:** Written comments and recommendations on the proposed collection of information should be received on or before April 30, 2010.

ADDRESSES: Submit written comments on the collection of information through the Federal Docket Management System (FDMS) at http://www.Regulations.gov; or to Mary Stout, Veterans Health Administration (193E1), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420 or e-mail: mary.stout@va.gov. Please refer to "OMB

Control No. 2900–0219" in any correspondence. During the comment period, comments may be viewed online through FDMS.

# FOR FURTHER INFORMATION CONTACT:

Mary Stout at (202) 461–5867 or FAX (202) 273–9381.

**SUPPLEMENTARY INFORMATION:** Under the PRA of 1995 (Pub. L. 104–13; 44 U.S.C. 3501–21), Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. This request for comment is being made pursuant to Section 3506(c)(2)(A) of the PRA.

With respect to the following collection of information, VHA invites comments on: (1) Whether the proposed collection of information is necessary for the proper performance of VHA's functions, including whether the information will have practical utility; (2) the accuracy of VHA's estimate of the burden of the proposed collection of information; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or the use of other forms of information technology.

Titles:

- a. Application for CHAMPVA Benefits, VA Form 10–10d.
- b. CHAMPVA Claim Form, VA Form 10–7959a.
- c. CHAMPVA Other Health Insurance (OHI) Certification, VA Form 10–7959c.
- d. CHAMPVA Potential Liability Claim, VA Form 10–7959d.
- e. Claim for Miscellaneous Expenses, VA Form 10–7959e

OMB Control Number: 2900–0219. Type of Review: Extension of a currently approved collection.

Abstracts:

a. VA Form 10–10d is used to determine eligibility of persons applying for healthcare benefits under the CHAMPVA program.

b. VA Form 10–7959a is used to accurately adjudicate and process beneficiaries claims for payment/reimbursement of related healthcare

c. VA Form 10–7959c is used to systematically obtain other health insurance information and to correctly coordinate benefits among all liable parties.

d. VA Form 10–7959d is used to gather additional information relative to the injury or illness as well as third party claim information.

e. Beneficiaries complete VA Form 10–7959e to claim payment/