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

Obtaining Copies of Proposals: Requesters may obtain a copy of the information collection documents from the General Services Administration, Regulatory Secretariat (MVCB), 1800 F Street NW., Washington, DC 20405, telephone 202–501–4755. Please cite OMB Control No. 9000–0167, American Recovery and Reinvestment Act— Reporting Requirements—One Time Reporting for First-tier Subcontractors, in all correspondence.

Dated: August 29, 2013.

Karlos Morgan,

Acting Director, Federal Acquisition Policy Division, Office of Government-wide Acquisition Policy, Office of Acquisition Policy, Office of Government-wide Policy. [FR Doc. 2013–21529 Filed 9–4–13; 8:45 am]

BILLING CODE 6820-EP-P

GENERAL SERVICES ADMINISTRATION

[Notice-FTR-2013-04; Docket No. 2013-0002; Sequence 25]

Maximum Per Diem Rates for the Continental United States (CONUS)

AGENCY: Office of Government-wide Policy (OGP), General Services Administration (GSA). ACTION: Notice of GSA Per Diem Bulletin FTR 14–01, Fiscal Year (FY) 2014 Continental United States (CONUS) per diem rates.

SUMMARY: The General Services Administration's (GSA) Fiscal Year (FY) 2014 per diem review has resulted in lodging and meal allowance changes for certain locations within the Continental United States (CONUS) to provide for reimbursement of Federal employees' expenses covered by per diem. The standard lodging per diem rate will increase to \$83. The meals and incidental expense tiers remain unchanged for FY 2014 and range from \$46-\$71. GSA identified two new nonstandard areas (NSAs): Big Spring, TX (Howard County); and Pearsall, TX (Frio, La Salle, and Medina Counties). The City of Hershey, PA, is now a separate NSA from Harrisburg, PA. In addition, Pasco, WA (Franklin County) and Richland, WA (Benton County) have been merged into a single NSA. Finally, Hendry County, FL is now included with the Palm Beach County, FL NSA.

The CONUS per diem rates prescribed in Bulletin 14–01 may be found at www.gsa.gov/perdiem. GSA bases the lodging rates on the average daily rate that the lodging industry reports to an independent organization. If a lodging rate or a per diem rate is insufficient to meet necessary expenses in any given location, Federal executive agencies can request that GSA review that location. Please review numbers five and six of GSA's per diem Frequently Asked Questions at (*www.gsa.gov/perdiemfaqs*) for more information on the special review process.

In addition, the Federal Travel Regulation allows for actual expense reimbursement as provided in §§ 301– 11.300 through 301–11.306.

DATES: This notice is effective September 5, 2013.

Applicability Date: Travel performed on or after October 1, 2013 through September 30, 2014.

FOR FURTHER INFORMATION CONTACT: For clarification of content, contact Ms. Jill Denning, Office of Government-wide Policy, Office of Asset and Transportation Management, at 202–208–7642, or by email at *travelpolicy@ gsa.gov.* Please cite Notice of GSA Per Diem Bulletin FTR 14–01.

SUPPLEMENTARY INFORMATION:

Background: GSA issues and publishes the CONUS per diem rates, formerly published in Appendix A to 41 CFR Chapter 301, solely on the Internet at *www.gsa.gov/perdiem.* This process, implemented in 2003, ensures more timely changes in per diem rates established by GSA for Federal employees on official travel within CONUS. Notices published periodically in the **Federal Register**, such as this one, now constitute the only notification of revisions in CONUS per diem rates to agencies.

Dated: August 30, 2013.

Craig J. Flynn,

Director, Travel and Relocation Policy, Office of Government-wide Policy. [FR Doc. 2013–21599 Filed 9–4–13; 8:45 am] BILLING CODE 6820-14–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Sole Source Cooperative Agreement Award to the National Association of County and City Health Officials (NACCHO)

AGENCY: Office of Policy and Planning, Assistant Secretary for Preparedness and Response (ASPR), Department of Health and Human Services (HHS). **ACTION:** Notification of a Sole Source Cooperative Agreement Award to the National Association of County and City Health Officials (NACCHO) for a grant titled: "Technical Assistance to Obtain Local Health Department and Community Input for National Health Security-related Activities".

Statutory Authority: Public Health Service Act, Section 1703(a), 42 U.S.C. 300u–2(a).

Estimated Amount of Award: \$1,500,000 USD.

Project Period: September 30, 2013 to September 29, 2016.

SUMMARY: ASPR requires collaboration with local health departments and officials to ensure that local governments, communities, private sector entities, non-governmental organizations, academia, and individuals can optimally coordinate their respective national health security roles and responsibilities to achieve community health resilience and strengthen health care, public health, and emergency management systems. This project aims to improve collaboration between ASPR and the local health departments (LHDs) to enhance national health security, foster community health resilience, and strengthen health care, public health, and emergency management systems.

One of the overarching goals of both the National Health Security Strategy (2009) and the ASPR Strategic Plan 2011–2015 is to build community health resilience. ASPR seeks to partner with LHDs and health officials which play a critical role in building community health resilience by employing and evaluating localized public health strategies, such as preparing local communities to withstand and recover from public health emergencies and disasters, and engaging local health departments and health care organizations to build healthcare coalitions. The project will foster better approaches for building community health resilience.

LHDs and health officials are intimately familiar with the communities and populations that they serve and are an essential partner in carrying out the mission of ASPR. ASPR seeks to engage LHDs and health officials as well as other appropriate local stakeholders in bi-directional communications to evaluate the effectiveness of, and ensure that, ASPR's strategies, policies, and programmatic activities are informed by and support the needs of local communities. The project will foster collaboration with local health officials to achieve, for example, national health security and strengthen local emergency preparedness, response, and recovery systems and capabilities, and build