Abstract: The Federal Reserve implemented this event-driven survey in 2009 and uses it to obtain information specifically tailored to the Federal Reserve’s supervisory, regulatory, operational, and other responsibilities. The Federal Reserve can conduct the FR 3051 up to 13 times per year (annual survey and another survey on a monthly basis). The frequency and content of the questions depend on changing economic, regulatory, or legislative developments.


Agency form number: FR 4202.

OMB control number: 7100–0348.

Frequency: On-occasion.

Reporters: State member banks, bank holding companies, and all other institutions for which the Federal Reserve is the primary federal supervisor.

Estimated annual reporting hours: Recordkeeping, 18,000 hours; Disclosure, 8,000 hours.

Estimated average hours per response: Recordkeeping, 180 hours; Disclosure, 80 hours.

Number of respondents: Recordkeeping, 100; Disclosure, 100.

General description of report: This information collection is voluntary and is authorized pursuant to sections 11(a), 11(i), 25, and 25A of the Federal Reserve Act (12 U.S.C. 248(a), 248(i), 602, and 611), section 5 of the Bank Holding Company Act (12 U.S.C. 1844(c)), and section 7(c)(2) of the International Banking Act of 1978 (12 U.S.C. 3105(c)(2)) for U.S. branches and agencies of foreign banks.

If the FR 3051 survey information is collected with a pledge of confidentiality for exclusively statistical purposes under Confidential Information Protection and Statistical Efficiency Act (CIPSEA), the information may not be disclosed by the Federal Reserve (or its contractor) in identifiable form, except with the informed consent of the respondent (CIPSEA 512(b), codified in notes to 44 U.S.C. 3501). Such information is therefore protected from disclosure under exemption 3 of the Freedom of Information Act (FOIA) (5 U.S.C. 552(b)(3)). If a CIPSEA pledge is made, either by the Federal Reserve or by its contractor, the Federal Reserve must safeguard the information as required by CIPSEA and OMB guidance.

If the FR 3051 survey information is not being collected under CIPSEA, the ability of the Federal Reserve to maintain the confidentiality of information provided by respondents will have to be determined on a case-by-case basis and depends on the type of information provided for a particular survey. In circumstances where identifying information is provided to the Federal Reserve, such information could possibly be protected from disclosure by FOIA exemptions 4 and 6.

Department of Health and Human Services

Centers for Disease Control and Prevention

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) has submitted the following information collection request to the Office of Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act of 1995. The notice for the proposed information collection is published to obtain comments from the public and affected agencies.

Written comments and suggestions from the public and affected agencies concerning the proposed collection of information are encouraged. Your comments should address any of the following: (a) 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; (b) Evaluate the accuracy of the agencies estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (c) Enhance the quality, utility, and clarity of the information to be collected; (d) 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; and (e) Assess information collection costs.

To request additional information on the proposed project or to obtain a copy of the information collection plan and instruments, call (404) 639–7570 or send an email to ombe@cdc.gov. Written comments and/or suggestions regarding the items contained in this notice should be directed to the Attention: CDC Desk Officer, Office of Management and Budget, Washington, DC 20503 or
by fax to (202) 395–5806. Written comments should be received within 30 days of this notice.

Proposed Project

Extended Evaluation of the National Tobacco Prevention and Control Public Education Campaign—New—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

In 2012, the Centers for Disease Control and Prevention (CDC) launched the first federally funded, national mass media campaign to educate consumers about the adverse health consequences of tobacco use (the National Tobacco Prevention and Control Public Education Campaign, or “The Campaign”). The Campaign continued in 2013 and 2014 with advertisements known as “Tips From Former Smokers.” Activities for Phase 3 of the campaign are ongoing. To assess the impact of The Campaign in Phases 1–3, CDC obtained OMB approval to conduct a series of longitudinal surveys for smokers and nonsmokers (OMB No. 0920–0923, exp. 3/31/2017).

New media activities for Phase 4 of The Campaign launched in March 2015. To support evaluation of Phase 4 of The Campaign, CDC plans to field 4 new waves of information collection. The surveys will be fielded in English and Spanish and will occur during late 2015 and throughout 2016. Once enrolled in the first wave of data collection, all participants will be re-Contacted for follow-up.

The sample for the data collection will originate from two sources: (1) An online longitudinal cohort of smokers and nonsmokers, sampled randomly from postal mailing addresses in the United States (address-based sample, or ABS); and (2) the existing GfK KnowledgePanel, an established long-term online panel of U.S. adults. The ABS-sourced longitudinal cohort will consist of smokers and nonsmokers who have not previously participated in any established online panels to reduce potential panel conditioning bias from previous participation. The new cohort will be recruited by GfK, utilizing similar recruitment methods that are used in the recruitment of KnowledgePanel. The GfK KnowledgePanel will be used in combination with the new ABS-sourced cohort to support larger sample sizes that will allow for more in-depth subgroup analysis, which is a key objective for CDC. All online surveys, regardless of sample source, will be conducted via the GfK KnowledgePanel Web portal for self-administered surveys.

Information will be collected through Web surveys to be self-administered on computers in the respondent’s home or in another convenient location. Information will be collected about smokers’ and nonsmokers’ awareness of and exposure to specific campaign advertisements; knowledge, attitudes, beliefs related to smoking and secondhand smoke; and other marketing exposure. The surveys will also measure behaviors related to smoking cessation (among the smokers in the sample) and behaviors related to nonsmokers’ encouragement of smokers to quit smoking, recommendations of cessation services, and attitudes about other tobacco and nicotine products.

It is important to evaluate The Campaign in a context that assesses the dynamic nature of tobacco product marketing and uptake of various tobacco products, particularly since these may affect successful cessation rates. Survey instruments may be updated to include new or revised items on relevant topics, including cigars, noncombustible tobacco products, and other emerging trends in tobacco use.

Participation is voluntary and there are no costs to respondents other than their time. The total estimated annualized burden hours are 15,584.

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**Estimated Annualized Burden Hours**

<table>
<thead>
<tr>
<th>Type of respondents</th>
<th>Form name</th>
<th>Number of respondents</th>
<th>Number of responses per respondent</th>
<th>Average burden per response (in hours)</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Population</td>
<td>Screening &amp; Consent Questionnaire</td>
<td>25,000</td>
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<td>5/60</td>
</tr>
<tr>
<td>Adults Smokers and Nonsmokers, ages 18–54, in the United States.</td>
<td>Smoker Survey (Wave A)</td>
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<td>30/60</td>
</tr>
<tr>
<td></td>
<td>Smoker Survey (Wave B)</td>
<td>4,000</td>
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<td>30/60</td>
</tr>
<tr>
<td></td>
<td>Smoker Survey (Wave C)</td>
<td>4,000</td>
<td>1</td>
<td>30/60</td>
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<tr>
<td></td>
<td>Smoker Survey (Wave D)</td>
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<td>30/60</td>
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<tr>
<td></td>
<td>Nonsmoker Survey (Wave A)</td>
<td>2,500</td>
<td>1</td>
<td>30/60</td>
</tr>
<tr>
<td></td>
<td>Nonsmoker Survey (Wave B)</td>
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<td></td>
<td>Nonsmoker Survey (Wave D)</td>
<td>2,000</td>
<td>1</td>
<td>30/60</td>
</tr>
</tbody>
</table>

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Leroy Richardson,
Chief Information Collection Review Office, Office of Scientific Integrity, Office of the Associate Director for Science, Office of the Director, Centers for Disease Control and Prevention.

[FR Doc. 2015–15831 Filed 6–26–15; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day–15–15UX]

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