benefits and services described in the State Plan.

ORR proposes adding language to clarify the following requirements related to the Unaccompanied Refugee Minors (URM) program: State policy on education and training vouchers, medical coverage, the location of URM providers, monitoring procedures, the process for establishing legal

responsibility, and information about sub-contractors.

States must use a pre-print format for required components of State Plans for ORR-funded refugee resettlement services and benefits prepared by the Office of Refugee Resettlement (ORR) of the Administration for Children and Families (ACF).

States must submit by August 15 each year new or amended State Plan for the next Federal fiscal year. For previously approved plan, States must certify no later than October 31 each year that the approved State plan is current and continues in effect.

Respondents: State Agencies, the District of Columbia, Replacement Designees under 45 CFR 400.301(c), and Wilson-Fish Grantees (State 2 Agencies) administering or supervising the administration of programs under Title IV of the Act.

ANNUAL BURDEN ESTIMATES

Instrument	Number of respondents	Number of responses per respondent	Average burden hours per response	Total burden hours
Title IV State Plan	57	1	15	855

Estimated Total Annual Burden Hours: 855.

Copies of the proposed collection may be obtained by writing to the Administration for Children and Families, Office of Planning, Research and Evaluation, 330 C Street SW., Washington, DC 20201. Attention Reports Clearance Officer. All requests should be identified by the title of the information collection. Email address: infocollection@acf.hhs.gov.

OMB Comment: OMB is required to make a decision concerning the collection of information between 30 and 60 days after publication of this document in the Federal Register. Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication. Written comments and recommendations for the proposed information collection should be sent directly to the following: Office of Management and Budget, Paperwork Reduction Project, Email: OIRA SUBMISSION@OMB.EOP.GOV, Attn: Desk Officer for the Administration for Children and Families.

Robert Sargis,

Reports Clearance Officer. [FR Doc. 2017–20649 Filed 9–26–17; 8:45 am]

BILLING CODE 4184-45-P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Community Living

Agency Information Collection Activities; Proposed Collection; Public Comment Request; Revision of a Currently Approved Information Collection (ICR–Rev) (OMB Approval Number 0985–0004); Title III Supplemental Form to the Financial Status Report (SF–425)

AGENCY: Administration for Community Living, HHS.

ACTION: Notice.

SUMMARY: The Administration for Community Living (ACL) is announcing that the proposed collection of information listed above has been submitted to the Office of Management and Budget (OMB) for review and clearance as required under section 506(c)(2)(A) of the Paperwork Reduction Act of 1995 (the PRA). This 30-day notice requests comments on the information collection requirements related to the proposed revision of an existing data collection regarding the information collection requirements in the Title III Supplemental Form to the Financial Status Report for all ACL/AoA Title III Grantees.

DATES: Submit written or electronic comments on the collection of information by October 27, 2017.

ADDRESSES: Submit written comments on the collection of information: by fax at 202.395.5806 or by email to *OIRA_submission@omb.eop.gov*, Attn: OMB Desk Officer for ACL.

FOR FURTHER INFORMATION CONTACT: Jesse Moore at (202) 795–7578 or

Jesse Moore at (202) 795–7578 or Jesse.Moore@acl.hhs.gov.

SUPPLEMENTARY INFORMATION: In compliance with Section 44 U.S.C.

3507, ACL has submitted the following proposed collection of information to OMB for review and clearance. ACL is requesting approval for three years of an extension of the currently approved data collection with modifications.

The Title III Supplemental Form to the Financial Status Report (SF-425) is used by ACL/AoA for all grantees to obtain a more detailed understanding of how projects funded under Title III of the Older Americans Act (OAA) of 1965, as amended, are being administered, and to ensure compliance with legislative requirements, pertinent Federal regulations and other applicable instructions and guidelines issued by the ACL. The level of data detail necessary is not available through the SF-425 form. The Supplemental Form provides necessary details on nonfederal required match, administration expenditures, Older Relative Caregivers expenditures, and Long Term Care Ombudsman expenditures.

In addition to renewing OMB approval of this data collection, minor changes are being proposed to it to reflect changes in statutory language that occurred as a result of the 2016 reauthorization of the OAA. Specifically, the term "Grandparents Only" has been changed to "Older Relative Caregivers," the new term in the OAA that describes this population of eligible service recipients. Similarly, the accompanying instructions for completing the Title III Supplemental Form to the Financial Status Report were also modified to include this same language. References in the Code of Federal Regulation (CFR) have been updated addressing financial reporting requirements and non-substantive technical edits have been made to the instructions.

Comments in Response to the 60 Day Federal Register Notice

A 60-day notice was published in the **Federal Register** in Vol. 82, No. 117, pg. 28068 on June 20, 2017. No comments were received.

Annual Burden Estimates

ACL estimates the burden of this collection of information as follows: 56 State Units on Aging (SUA) respond semi-annually which have an average estimated burden of 2 hours per grantee for a total of 112 hours per submission.

The proposed data collection tool may be found on the ACL Web site for review at: https://www.acl.gov/about-acl/public-input.

Respondent/data collection activity	Number of respondents	Responses per respondent	Hours per response	Total annual burden hours
Title III Supplemental Form to the Financial Status Report	56	2/yr	2	224
Total	56	2/yr	2	224

Dated: September 19, 2017.

Mary Lazare,

Principal Deputy Administrator. [FR Doc. 2017–20666 Filed 9–26–17; 8:45 am] BILLING CODE 4154–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. FDA-2017-N-0001]

Advisory Committee; National Mammography Quality Assurance Advisory Committee; Renewal

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice; renewal of advisory committee.

SUMMARY: The Food and Drug Administration (FDA) is announcing the renewal of the National Mammography Quality Assurance Advisory Committee by the Commissioner of Food and Drugs (the Commissioner). The Commissioner has determined that it is in the public interest to renew the National Mammography Quality Assurance Advisory Committee for an additional 2 years beyond the charter expiration date. The new charter will be in effect until July 7, 2019.

DATES: Authority for the National Mammography Quality Assurance Advisory Committee will expire on July 7, 2017, unless the Commissioner formally determines that renewal is in the public interest.

FOR FURTHER INFORMATION CONTACT: Sara Anderson, Office of Device Evaluation, Center for Devices and Radiological Health, Food and Drug Administration, 10903 New Hampshire Ave., Bldg. 66, Rm. G616, Silver Spring, MD 20993—0002, 301–796–7047, Sara.Anderson@fda.hhs.gov.

SUPPLEMENTARY INFORMATION: Pursuant to 41 CFR 102–3.65 and approval by the Department of Health and Human

Services (HHS) pursuant to 45 CFR part 11 and by the General Services Administration, FDA is announcing the renewal of the National Mammography Quality Assurance Advisory Committee (Committee). The Committee is a nondiscretionary Federal advisory committee established to provide advice to the Commissioner. The HHS Secretary and, by delegation, the Assistant Secretary for the Office of Public Health and Science and the Commissioner are charged with the administration of the Federal Food, Drug, and Cosmetic Act and various provisions of the Public Health Service Act. The Mammography Quality Standards Act of 1992 amends the Public Health Service Act to establish national uniform quality and safety standards for mammography facilities. The Committee advises the HHS Secretary and, by delegation, the Commissioner in discharging their responsibilities with respect to establishing a mammography facilities certification program. The Committee shall advise FDA on:

- Developing appropriate quality standards and regulations for mammography facilities;
- Developing appropriate standards and regulations for bodies accrediting mammography facilities under this program;
- Developing regulations with respect to sanctions;
- Developing procedures for monitoring compliance with standards;
- Establishing a mechanism to investigate consumer complaints;
- Reporting new developments concerning breast imaging which should be considered in the oversight of mammography facilities;
- Determining whether there exists a shortage of mammography facilities in rural and health professional shortage areas and determining the effects of personnel on access to the services of such facilities in such areas;

 Determining whether there will exist a sufficient number of medical physicists after October 1, 1999; and

• Determining the costs and benefits of compliance with these requirements.

The Committee shall consist of a core of 15 members, including the Chair. Members and the Chair are selected by the Commissioner or designee from among physicians, practitioners, and other health professionals, whose clinical practice, research specialization, or professional expertise includes a significant focus on mammography. Members will be invited to serve for overlapping terms of up to 4 years. Almost all non-Federal members of this Committee serve as Special Government Employees. The core of voting members shall include at least four individuals from among national breast cancer or consumer health organizations with expertise in mammography, and at least two practicing physicians who provide mammography services. In addition to the voting members, the Committee shall include two nonvoting industry representatives who have expertise in mammography equipment. The Committee may include one technically qualified member, selected by the Commissioner or designee, who is identified with consumer interests.

Further information regarding the most recent charter and other information can be found at https://www.fda.gov/AdvisoryCommittees/CommitteesMeetingMaterials/Radiation-EmittingProducts/National
MammographyQualityAssurance
AdvisoryCommittee/ucm520365.htm or by contacting the Designated Federal
Officer (see FOR FURTHER INFORMATION CONTACT). In light of the fact that no change has been made to the Committee name or description of duties, no amendment will be made to 21 CFR 14.100.

This document is issued under the Federal Advisory Committee Act (5 U.S.C. app.). For general information related to FDA advisory committees,