C. Federal Reserve Bank of San Francisco (Tracy Basinger, Director, Regional and Community Bank Group) 101 Market Street, San Francisco, California 94105-1579:

1. Five Star Bancorp, Rocklin, California; to acquire 100 percent of Five Star Bank Natomas, Sacramento, California.

Board of Governors of the Federal Reserve System, November 17, 2003.

Robert deV. Frierson,

Deputy Secretary of the Board.

[FR Doc. 03–29063 Filed 11–20–03; 8:45 am]

BILLING CODE 6210–01–S

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

Findings of Scientific Misconduct

AGENCY: Office of the Secretary, HHS.

ACTION: Notice; correction.

SUMMARY: The Office of the Secretary, HHS, published a notice in the **Federal Register** of November 13, 2003, concerning a finding of scientific misconduct regarding Dr. Smith. The document contained an omission and a typographical error.

FOR FURTHER INFORMATION CONTACT: Director, Division of Investigative Oversight, Office of Research Integrity, 301–443–5330.

Correction

In the **Federal Register** of November 13, 2003, in FR Doc. 03–28377, on page 64351 in the second column following line 11, insert the following text to read:

VII. Dissertation Table 11 entitled ''EPR determined inter-nitroxide distances for NSAID and arachidonate complexes of PGH–2 MBD mutants;''

and change the previously-printed Roman number VII to Roman number VIII.

Dated: November 14, 2003.

Chris B. Pascal,

Director, Office of Research Integrity.

[FR Doc. 03–29066 Filed 11–20–03; 8:45 am]

BILLING CODE 4150–31–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare and Medicaid Services

[Document Identifier: CMS–382, CMS–10003 and CMS–10098]

Agency Information Collection Activities: Proposed Collection; Comment Request

AGENCY: Centers for Medicare and Medicaid Services, HHS.

In compliance with the requirement of section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995, the Centers for Medicare and Medicaid Services (CMS) (formerly known as the Health Care Financing Administration (HCFA)), Department of Health and Human Services, is publishing the following summary of proposed collections 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.

1. *Type of Information Collection Request:* Extension of a currently approved collection; *Title of Information Collection:* ESRD Beneficiary Selection and Supporting Regulations in 42 CFR 414.330; *Form No.:* CMS–382 (OMB# 0938–0372); *Use:* ESRD facilities have each new home dialysis patient select one of two methods to handle Medicare reimbursement. The intermediaries pay for the beneficiaries selecting Method I and the carriers pay for the beneficiaries selecting Method II. This system was developed to avoid duplicate billing by both intermediaries and carriers; *Frequency:* Other: One-time only; *Affected Public:* Individuals or households, business or other for-profit, not-for-profit institutions; *Number of Respondents:* 7,400; *Total Annual Responses:* 7,400; *Total Annual Hours:* 617.

2. *Type of Information Collection Request:* Extension of a currently approved collection; *Title of Information Collection:* Medicare+Choice Appeals Notices, ''Notice of Denial of Medical Coverage'', ''Notice of Denial Payment''; *Form No.:* CMS–10003 (OMB# 0938–0829); *Use:* Section 1852(g)(1)(B) requires M+C organizations to provide determinations to deny coverage (i.e., medical services or payment) in writing and include a statement in understandable language of the reasons for the denial and a description of the reconsideration and appeals processes.

These notices fulfill the statutory requirement.; *Frequency:* On occasion and other: distrubution; *Affected Public:* Individuals or households, business or other for-profit, not-for-profit institutions; *Number of Respondents:* 71,411; *Total Annual Responses:* 71,411; *Total Annual Hours:* 78,290.

3. *Type of Information Collection Request:* New Collection; *Title of Information Collection:* 1–800–Medicare Beneficiary Satisfaction Survey; *Form No.:* CMS–10098 (OMB# 0938–NEW); *Use:* The Beneficiary Satisfaction survey is performed to insure that the CMS 1–800–Medicare helpline contractor is delivering satisfactory service to the Medicare beneficiaries. It gathers data on several helpline operations such as print fulfillment and Web site tools hosted on *http://www.medicare.gov.* Respondents to the survey are Medicare beneficiaries that have contacted the 1–800–Medicare number within the past week for benefits and services information.; *Frequency:* On occasion; *Affected Public:* Individuals or households; *Number of Respondents:* 14,400; *Total Annual Responses:* 14,400; *Total Annual Hours:* 1,200.

To obtain copies of the supporting statement and any related forms for the proposed paperwork collections referenced above, access CMS's Web site address at *http://cms.hhs.gov/regulations/pra/default.asp*, or E-mail your request, including your address, phone number, OMB number, and CMS document identifier, to *Paperwork@hcfa.gov*, or call the Reports Clearance Office on (410) 786–1326. Written comments and recommendations for the proposed information collections must be mailed within 60 days of this notice directly to the CMS Paperwork Clearance Officer designated at the following address: CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development and Issuances, Attention: Melissa Musotto, Room C5–14–03, 7500 Security Boulevard, Baltimore, Maryland 21244–1850.