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.

Comments submitted in response to this notice will be included or summarized in our request for OMB approval of the relevant information collection. All comments are part of the public record and subject to disclosure. Please do not include any confidential or inappropriate material in your comments.

Previous Request for Comments

On January 26, 2026, the Commission published a notice and request for comment in the **Federal Register** (91 FR 3195) regarding the agency's request for approval from OMB for information collections as required by the Paperwork Reduction Act of 1995. During the 60-day period, the Commission received one comment from Gnosis Freight. The comment was relevant to the collection, but the FMC views the recommendations as a risk to ocean carrier proprietary information, an excessive burden on the maritime industry, and outside the scope of what the Ocean Shipping Reform Act of 2022 (OSRA 2022) mandate requires. The proposed mandatory master bill of lading number and container number fields would transform vessel-level aggregate reporting into container-level shipment tracking, substantially increasing compliance costs and exposing competitively sensitive operational data.

Information Collection Open for Comment

Title: Container vessel imports and exports.

OMB Approval Number: 3072–0074 (Expires October 31, 2026).

Abstract: The Ocean Shipping Reform Act of 2022 (OSRA 2022) mandates that: ''The Federal Maritime Commission shall publish on its website a calendar quarterly report that describes the total import and export tonnage and the total loaded and empty 20-foot equivalent units per vessel (making port in the United States, including any territory or possession of the United States) operated by each ocean common carrier covered under this chapter. Ocean common carriers under this chapter shall provide to the Commission all necessary information, as determined by the Commission, for completion of this report.'' 46 U.S.C. 41110. To comply with this quarterly reporting requirement the Commission will request information on tonnage and 20-foot equivalent units from each identified common carrier on a monthly basis. The information will be used to compile and publish a quarterly report on total import and export tonnage and total loaded and empty 20-foot equivalent units per vessel operated by common carriers.

Current Actions: Revision of a currently approved collection.

Type of Review: Extension.

Needs and Uses: The Commission will use collected data to publish a quarterly report as directed by 46 U.S.C. 41110.

Frequency: Information will be collected monthly.

Type of Respondents: The thirty (30) largest vessel-operating common carriers by containerized cargo volume transporting 20-foot equivalent units (total across imports and exports, regardless of whether they are laden) in or out of the United States in ocean borne foreign commerce. (The Commission estimates that these thirty (30) largest carriers are responsible for transporting 98 percent of the market share of containerized freight moving in international commerce to and from the United States.).

Number of Annual Respondents: 30.

Estimated Time per Response: 6 hours and 40 minutes.

Total Annual Burden: 2,401 hours.

Jennifer Everling,

Assistant Secretary.

[FR Doc. 2026–10477 Filed 5–26–26; 8:45 am]

BILLING CODE 6730–02–P

FEDERAL RESERVE SYSTEM

Formations of, Acquisitions by, and Mergers of Bank Holding Companies

The companies listed in this notice have applied to the Board for approval, pursuant to the Bank Holding Company Act of 1956 (12 U.S.C. 1841 *et seq.*) (BHC Act), Regulation Y (12 CFR part 225), and all other applicable statutes and regulations to become a bank holding company and/or to acquire the assets or the ownership of, control of, or the power to vote shares of a bank or bank holding company and all of the banks and nonbanking companies owned by the bank holding company, including the companies listed below.

The public portions of the applications listed below, as well as other related filings required by the Board, if any, are available for immediate inspection at the Federal Reserve Bank(s) indicated below and at the offices of the Board of Governors. This information may also be obtained on an expedited basis, upon request, by contacting the appropriate Federal Reserve Bank and from the Board's Freedom of Information Office at *https://www.federalreserve.gov/foia/request.htm.* Interested persons may express their views in writing on the standards enumerated in the BHC Act (12 U.S.C. 1842(c)).

Comments received are subject to public disclosure. In general, comments received will be made available without change and will not be modified to remove personal or business information including confidential, contact, or other identifying information. Comments should not include any information such as confidential information that would not be appropriate for public disclosure.

Comments regarding each of these applications must be received at the Reserve Bank indicated or the offices of the Board of Governors, Benjamin W. McDonough, Secretary of the Board, 20th Street and Constitution Avenue NW, Washington, DC 20551–0001, not later than June 26, 2026.

A. Federal Reserve Bank of Dallas (Lindsey Wieck, Director, Mergers & Acquisitions) 2200 North Pearl Street, Dallas, Texas 75201–2272. Comments can also be sent electronically to *Comments.applications@dal.frb.org:*

1. *Augustus International Inc., Dallas, Texas;* to become a bank holding company by acquiring Augustus National Bank, N.A., Dallas, Texas.

Board of Governors of the Federal Reserve System.

Michele Taylor Fennell,

Associate Secretary of the Board.

[FR Doc. 2026–10497 Filed 5–26–26; 8:45 am]

BILLING CODE P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day–26–1431; Docket No. CDC–2026–0826]

Proposed Data Collection Submitted for Public Comment and Recommendations

AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: Notice with comment period.

SUMMARY: The Centers for Disease Control and Prevention (CDC), as part of

its continuing effort to reduce public burden and maximize the utility of government information, invites the general public and other federal agencies the opportunity to comment on a continuing information collection, as required by the Paperwork Reduction Act of 1995. This notice invites comment on a proposed information collection project titled Rape Prevention and Education (RPE) Program. This program is designed to collect data from RPE recipients to assess how recipients are improving prevention infrastructure, implementing and evaluating prevention strategies to expand efforts to prevent sexual assault, and using data to inform prevention action.

DATES: CDC must receive written comments on or before July 27, 2026.

ADDRESSES: You may submit comments, identified by Docket No. CDC–2026–0826 by either of the following methods:

- *Federal eRulemaking Portal: www.regulations.gov.* Follow the instructions for submitting comments.
- *Mail:* Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS H21–8, Atlanta, Georgia 30329.

Instructions: All submissions received must include the agency name and Docket Number. CDC will post, without change, all relevant comments to *www.regulations.gov.*

Please note: Submit all comments through the Federal eRulemaking portal (*www.regulations.gov*) or by U.S. mail to the address listed above.

FOR FURTHER INFORMATION CONTACT: To request more information on the proposed project or to obtain a copy of the information collection plan and instruments, contact Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS H21–8, Atlanta, Georgia 30329; Telephone: 404–639–7570; Email: *omb@cdc.gov.*

SUPPLEMENTARY INFORMATION: Under the Paperwork Reduction Act of 1995 (PRA) (44 U.S.C. 3501–3520), federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. In addition, the PRA also requires federal agencies to provide a 60-day notice in the **Federal Register** concerning each proposed collection of information, including each new proposed collection, each proposed extension of existing collection of information, and each reinstatement of previously approved information collection before submitting the collection to the OMB for approval. To comply with this requirement, we are publishing this notice of a proposed data collection as described below.

The OMB is particularly interested in comments that will help:

1. 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;
2. Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;
3. Enhance the quality, utility, and clarity of the information to be collected;
4. 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 submissions of responses; and
5. Assess information collection costs.

Proposed Project

Rape Prevention and Education (RPE) Program (OMB Control No. 0920–1431, Exp. 4/30/2027)—Revision—National Center for Injury Prevention and Control (NCIPC), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The Centers for Disease Control and Prevention (CDC) seeks OMB approval for a Revision to Rape Prevention and Education (RPE) Program (OMB Control No. 0920–1431). OMB approval is requested for three years. CDC will collect data from RPE recipients to assess how recipients are improving prevention infrastructure, implementing and evaluating prevention strategies to expand efforts to prevent sexual assault, and using data to inform prevention action. The RPE program is funded under the Violence Against Women Act (VAWA) and Section 393A(a) of the PHS Act (42 U.S.C. 280b–1b(a) and Section 392(a)(1) of the PHS Act (42 U.S.C. 280b–1(a)(1)). Eligible entities are based on the VAWA legislation. The legislative authority requires CDC to fund the RPE Program. The proposed information collection is authorized by the Public Health Services Act (PHS Act) which provides the legislative means for states to advance public health across the lifespan and reduce differences in health outcomes. Section 301(a) of the PHS Act 42 U.S.C. 241(a) authorizes funding grants and cooperative agreements to aid ''other appropriate public authorities, scientific institutions, and scientists in the conduct of, and promote the coordination of, research, investigations, experiments, demonstrations, and studies relating to the causes, diagnosis, treatment, control, and prevention of physical and mental diseases and impairments of man.''

Sexual violence (SV) is a major public health problem: one in three women and one in four men experienced sexual violence involving physical contact during their lifetimes. Nearly one in five women and one in 38 men have experienced completed or attempted rape. Sexual violence starts early: one in three female and one in four male rape victims experienced it for the first time between 11–17 years old. CDC's Division of Violence Prevention (DVP) provides national leadership in prevention of SV perpetration and victimization before it begins (*i.e.,* primary prevention). DVP administers the RPE Program, which provides funding to health departments and sexual violence coalitions in all 50 states, the District of Columbia (DC), and U.S. territories as well as up to 10 tribal coalitions.

The NOFOs associated with the RPE Program encourage the expansion of strategies implemented and evaluated at the community- and societal-level using a comprehensive approach. Recipients will have an opportunity to: (1) continue to build program and partner capacity to facilitate and monitor the implementation of SV prevention programs, practices, and policies; (2) continue to support state and territorial health departments' implementation of community-and societal-level programs, practices, and policies to prevent SV; (3) continue to support the implementation of data-driven, comprehensive, evidence-based SV primary prevention strategies, and approaches focused mainly on centering and engaging communities; and to (4) continuously conduct data to action activities to inform changes or adaptations to existing SV strategies or on selected and implemented additional strategies.

The RPE Program is the principal federally funded program focused on SV primary prevention. Collecting information about the implementation and outcomes of funded recipient through the online data system, DVP Partners Portal, is crucial to informing SV prevention nationally; enhancing accountability of the use of federal funds; providing timely program reports and responses to information requests, such as Congressional requests mandated by the authorizing legislation; improving real-time communications

between CDC and RPE recipients; and strengthening CDC's capacity to provide responsive data-driven technical assistance and to monitor and evaluate recipients' progress and performance.

CDC requests OMB approval for an estimated 1,440 annual burden hours. There is no cost to respondents other than their time to participate.

ESTIMATED ANNUALIZED BURDEN HOURS

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hours)	Total burden (in hours)
RPE-funded Health Departments (State, DC, and Territories), Sexual Assault Coalitions, Tribal Coalitions and their Designated Delegates.	Annual Performance Report.	144	1	10	1,440
Total					1,440

Jeffrey M. Zirger,

Lead, Information Collection Review Office, Office of Public Health Ethics and Regulations, Office of Science, Centers for Disease Control and Prevention.

[FR Doc. 2026–10514 Filed 5–26–26; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day–26–1414; Docket No. CDC–2026–0827]

Proposed Data Collection Submitted for Public Comment and Recommendations

AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS).

ACTION: Notice with comment period.

SUMMARY: The Centers for Disease Control and Prevention (CDC), as part of its continuing effort to reduce public burden and maximize the utility of government information, invites the general public and other federal agencies the opportunity to comment on a continuing information collection, as required by the Paperwork Reduction Act of 1995. This notice invites comment on a proposed information collection project titled Advancing Violence Epidemiology in Real-Time (AVERT). The AVERT program provides funding to jurisdictions to conduct routine monitoring of Emergency Department visits related to violence-related injuries and mental health conditions, and to analyze these data in a timely manner.

DATES: CDC must receive written comments on or before July 27, 2026.

ADDRESSES: You may submit comments, identified by Docket No. CDC–2026–0827 by either of the following methods:

- *Federal eRulemaking Portal: www.regulations.gov.* Follow the instructions for submitting comments.
- *Mail:* Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS H21–8, Atlanta, Georgia 30329.

Instructions: All submissions received must include the agency name and Docket Number. CDC will post, without change, all relevant comments to *www.regulations.gov.*

Please note: Submit all comments through the Federal eRulemaking portal (*www.regulations.gov*) or by U.S. mail to the address listed above.

FOR FURTHER INFORMATION CONTACT: To request more information on the proposed project or to obtain a copy of the information collection plan and instruments, contact Jeffrey M. Zirger, Information Collection Review Office, Centers for Disease Control and Prevention, 1600 Clifton Road NE, MS H21–8, Atlanta, Georgia 30329; Telephone: 404–639–7570; Email: *omb@cdc.gov.*

SUPPLEMENTARY INFORMATION: Under the Paperwork Reduction Act of 1995 (PRA) (44 U.S.C. 3501–3520), federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor. In addition, the PRA also requires federal agencies to provide a 60-day notice in the **Federal Register** concerning each proposed collection of information, including each new proposed collection, each proposed extension of existing collection of information, and each reinstatement of previously approved information collection before submitting the collection to the OMB for approval. To comply with this requirement, we are publishing this notice of a proposed data collection as described below.

The OMB is particularly interested in comments that will help:

1. 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;
2. Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;
3. Enhance the quality, utility, and clarity of the information to be collected;
4. 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 submissions of responses; and
5. Assess information collection costs.

Proposed Project

Advancing Violence Epidemiology in Real-Time (AVERT) (OMB Control No. 0920–1414, Exp. 9/30/2026)—Revision—National Center for Injury Prevention and Control (NCIPC), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

This Information Collection Request (ICR) for Advancing Violence Epidemiology in Real-Time (AVERT) is submitted as a renewal of previously approved information collection. This request is for continued approval to collect information for AVERT using the existing data collection approach, case definitions, and National Syndromic Surveillance Program (NSSP) infrastructure. The length of data collection requested for OMB approval is three years. AVERT supports data collection efforts that expand and enhance partnerships with public health departments initiated to share