

<b>USER INFORMATION (Please print)</b>					
First Name	Gwellnar	Middle Name	L.	Last Name	Banks
Email Address	gbanks@doc.gov			Telephone#	(202) 482-3781
User's Agency Name (print):		U. S. Department of Commerce			
User's Address:		14 <sup>th</sup> + Constitution Ave., NW; HCHB - Rm 6611; Wash. DC 20230			
Fed. Gov't-issued Picture ID	ID#	27416 11086981-1	Type	Employee's ID Badge	
Fed. Gov't-issued Picture ID	ID#	1364789	Type	DC Driver's License	
Non-Fed. Gov't-issued Picture ID	ID#		Type		
Non-Fed. Gov't-issued Picture ID or ID	ID#		Type		
Supervisor Signature:					
I declare under penalty of perjury that the foregoing is true and correct.					
Executed on: 10-11-07 (date) Signature: <i>Diana H. Hynes</i>					
Supervisor Name (Printed): Diana H. Hynes					
User Signature:					
I declare under penalty of perjury that the foregoing is true and correct.					
Executed on: 10-11-2007 (date) Signature: <i>Gwellnar Banks</i>					

SECTION 2. (This section to be completed by Registration Authority and User at time of Registration)

<b>RA INFORMATION (Please print)</b>			
RA First Name		RA Last Name	
RA Telephone #		RA Email Address	
Date of Registration Request	Date:		
Fed. Gov't-issued Picture ID verified	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Non-Fed. Gov't-issued Picture ID verified	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Non-Fed. Gov't-issued ID verified	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
PKI Credential Type (software or smartcard)	<input type="checkbox"/> Software (.epf file) <input type="checkbox"/> Smartcard		
Smartcard Type (if smartcard credential): (vendor and model number)	Smartcard Serial Number: (if smartcard credential)		
PKI Credential Issuance Completed <input type="checkbox"/> Yes <input type="checkbox"/> No	Date and Time:		
User Name (CN)	cn = _____		
User Name (print)	User's Agency Name (print):		
User Signature			
I declare under penalty of perjury that the foregoing is true and correct.			
Executed on: _____ (date) Signature: _____			
RA Signature			
I declare under penalty of perjury that the foregoing is true and correct.			
Executed on: _____ (date) Signature: _____			



**UNITED STATES DEPARTMENT OF COMMERCE**  
**Chief Information Officer**

Washington, D.C. 20230

OCT 17 2007

Ms. Susan E. Dudley  
Administrator  
Office of Information and Regulatory Affairs  
Office of Management and Budget  
Washington, DC 20503

Dear Ms. Dudley:

The Department of Commerce's National Telecommunication and Information Administration (NTIA) requests expedited review of an information collection request, "NTIA Message Testing Focus Groups for the Digital-to-Analog Converter Box." We request that the Office of Management and Budget conclude its review by October 17, 2007.

Congress directed the National Telecommunications and Information Administration (NTIA) to create and implement a program to provide coupons for consumers to purchase digital-to-analog converter boxes (*See* Title III of the Deficit Reduction Act of 2005, Pub. L. No. 109-171, 120 Stat. 4, 21 (Feb. 8, 2006)). These converter boxes are necessary for consumers who wish to continue receiving broadcast programming over the air using analog-only television sets after February 18, 2009 - - the date that television stations are required by law to cease analog broadcasting. On March 15, 2007, NTIA published a Final Rule establishing the parameters of the Coupon Program and describing the rights and responsibilities of interested parties. In accordance with the Act, and its own regulations, NTIA must accept applications from consumers for these coupons beginning January 1, 2008.

In an effort to ensure materials and messages developed for the campaign resonate with all targeted audiences, these items must be tested with representatives of these segments. The targeted audiences, identified as the more reliant on over-the-air television, include the following: (1) economically disadvantaged households; (2) rural residents; (3) minorities; (4) people with disabilities; and (5) seniors. NTIA, through its contractor, will conduct focus groups to develop an application that ensures consistent messaging and avoid confusion to consumers. Once the information is developed from these focus groups, NTIA will submit the application to OMB for approval.

This expedited review is necessary to conduct the focus groups sessions. These steps will enable consumers to apply for converter box coupons by the statutory mandated date of January 1, 2008. If focus groups are not used to collect this information, the consumer education campaign

as well as the application process may be confusing to consumers. As a result, households that rely solely on over-the-air broadcasts may not apply for coupons, and thereby lose access to television after February 17, 2009.

We appreciate your assistance in this matter.

Sincerely,

A handwritten signature in cursive script, appearing to read "Lisa K. West".

Barry C. West

Handwritten initials in cursive script, appearing to be "JC".