

Dated: February 21, 2014.

**Karen V. Gregory,**  
*Secretary.*

[FR Doc. 2014-04182 Filed 2-25-14; 8:45 am]

BILLING CODE 6730-01-P

## FEDERAL RESERVE SYSTEM

### Change in Bank Control Notices; Acquisitions of Shares of a Bank or Bank Holding Company

The notificants listed below have applied under the Change in Bank Control Act (12 U.S.C. 1817(j)) and § 225.41 of the Board's Regulation Y (12 CFR 225.41) to acquire shares of a bank or bank holding company. The factors that are considered in acting on the notices are set forth in paragraph 7 of the Act (12 U.S.C. 1817(j)(7)).

The notices are available for immediate inspection at the Federal Reserve Bank indicated. The notices also will be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing to the Reserve Bank indicated for that notice or to the offices of the Board of Governors. Comments must be received not later than March 13, 2014.

A. Federal Reserve Bank of Chicago (Colette A. Fried, Assistant Vice President) 230 South LaSalle Street, Chicago, Illinois 60690-1414:

1. *Rick A. Tromble and Michele L. Tromble, individually and as trustees of the Rick A. Tromble Revocable Living Trust and the Michele L. Tromble Revocable Living Trust*, both of Cheboygan, Michigan; to retain voting shares of CNB Corporation, and thereby indirectly retain voting shares of Citizens National Bank of Cheboygan, both in Cheboygan, Michigan.

Board of Governors of the Federal Reserve System, February 21, 2014.

**Margaret McCloskey Shanks,**  
*Deputy Secretary of the Board.*

[FR Doc. 2014-04162 Filed 2-25-14; 8:45 am]

BILLING CODE 6210-01-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 applications listed below, as well as other related filings required by the Board, are available for immediate inspection at the Federal Reserve Bank indicated. The applications will also be available for inspection at the offices of the Board of Governors. Interested persons may express their views in writing on the standards enumerated in the BHC Act (12 U.S.C. 1842(c)). If the proposal also involves the acquisition of a nonbanking company, the review also includes whether the acquisition of the nonbanking company complies with the standards in section 4 of the BHC Act (12 U.S.C. 1843). Unless otherwise noted, nonbanking activities will be conducted throughout the United States.

Unless otherwise noted, comments regarding each of these applications must be received at the Reserve Bank indicated or the offices of the Board of Governors not later than March 24, 2014.

A. Federal Reserve Bank of Kansas City (Dennis Denney, Assistant Vice President) 1 Memorial Drive, Kansas City, Missouri 64198-0001:

1. *Otten Holdings, LLC*, Norfolk, Nebraska; to become a bank holding company by acquiring at least 33 percent of the voting shares of FEO Investments, Inc., and thereby indirectly acquire Elkhorn Valley Bank and Trust, both in Norfolk, Nebraska.

In connection with this application, Applicant also has applied to engage in general insurance activities in a town not exceeding 5,000 in population and community development activities, pursuant to sections 225.28(b)(11)(iii)(A) and (b)(12)(i) of Regulation Y.

Board of Governors of the Federal Reserve System, February 21, 2014.

**Margaret McCloskey Shanks,**  
*Deputy Secretary of the Board.*

[FR Doc. 2014-04161 Filed 2-25-14; 8:45 am]

BILLING CODE 6210-01-P

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

[60Day-14-14KW]

### Proposed Data Collections Submitted for Public Comment and Recommendations

In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, the Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed projects or to obtain a copy of the data collection plans and instruments, call 404-639-7570 or send comments to Leroy Richardson, 1600 Clifton Road, MS D-74, Atlanta, GA 30333 or send an email to [omb@cdc.gov](mailto:omb@cdc.gov).

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Written comments should be received within 60 days of this notice.

### Proposed Project

Measuring the Effects of State and Local Radon Policies—New—National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

### Background and Brief Description

Lung cancer is the leading cause of cancer-related death in the U.S. population, with only 17% of lung cancer patients surviving 5 years or more from the time of diagnosis. Radon is a radioactive gas that concentrates in homes and is well-established as the leading cause of lung cancer in non-smokers and the second leading cause of lung cancer in smokers. Radon exposure reduction is the focus of two Healthy People 2020 objectives related to reduction of the number of people living in high-concentration radon homes and the subject of a "Call to Action" from

the US Surgeon General. Despite these recommendations, it is estimated that fewer than 25% of existing U.S. homes have been tested for radon.

There are significant gaps in understanding the impact of radon control efforts, especially those in the area of policy. As of February 2013, 22 states required general disclosure of known environmental hazards (including radon) during home sale, 21 states had radon professional licensure policies, and 8 states required notification of radon risks and test results as separate documents during a home sale. Twenty-one states had no radon-related policies. To date there are no studies that assess the effect of radon-related policies on increasing awareness or testing of radon and decreasing exposure to this well-known carcinogen.

To address this gap in knowledge, CDC proposes to conduct a new study to understand how state and local radon policies affect radon awareness, testing, and mitigation. The primary focus of the study will be on how single-family homebuyers and real estate agents understand and are affected by radon policies involving home sales. This information will allow stakeholders to better understand the impact of various policies intended to prevent exposure to radon and decrease the incidence of lung cancer in the U.S. population.

The study approach will involve complementary qualitative and quantitative methods whose results will guide future research and educational efforts. The main outcomes evaluated will be the effect of policies related to generic disclosure of environmental hazards at the time of home sale, notification specific to awareness of and

test results for radon at the time of home sale, and radon professional certification. Participants' understanding of the Environmental Protection Agency (EPA) lead-based paint disclosure law, which is present in all states, will be assessed to understand if general environmental awareness differs between states.

Investigators seek to interview and send questionnaires to participants from four states: two states with home sale notification policies specific to radon, one state with only a generic disclosure law, and one state with no environmental disclosure policy. An additional consideration for recruiting these four states is to identify two states that have radon professional certification policies to compare to two states that do not.

After recruiting states with the desired mix of characteristics, investigators will focus on identifying counties or jurisdictions that have a median home sales price that approximates the median home price of the relevant Metropolitan Statistical Area. This will improve the ability to apply findings to other situations.

The Homebuyer Component of the study will involve information collection from 3,000 individuals (750 from each state) who purchased a single-family home in the last 12 months. Potential respondents for the Homebuyer Survey will be identified through review of publicly-available tax records of home sales and recruited through mailed invitations. The survey will ask questions regarding homebuyers' knowledge about radon and lead-based paint as well as how home sale and professional certification policies for radon and lead-based paint

affected their decisions during the home buying process. Responses will be collected via mail and the internet. To improve the quality of information collected through the Homebuyer Survey, a draft instrument will be cognitively tested with up to 32 respondents before the final survey is distributed.

The Real Estate Agent Component of the study will involve focus groups with full-time real estate agents who specialize in single-family home sales and are members of a national, state, or an equivalent realtors association. Respondents will be recruited through mailed invitations to real estate offices, phone calls, and possibly outreach at local real estate agent meetings. Investigators will conduct three, one-hour focus groups of 6–8 agents per state for a total of up to 96 respondents. These recorded discussions will ask real estate agents about their and their clients' understanding of radon and lead, how/whether this understanding affected decisions during the home buying process, and whether professional certification affected decisions during the home buying process.

Understanding how these policies affect homebuyers and real estate agents will allow help stakeholders better prevent radon exposure and decrease the incidence of lung cancer in the U.S. population. This information will help provide an evidence basis for CDC's many grantees who work to understand the impact of policies in their states. OMB approval is requested for two years. Participation is voluntary and there are no costs to respondents other than their time.

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)
Homebuyers .....	Cognitive Testing Interview Guide ...	16	1	1	16
Real Estate Agents .....	Homebuyer Survey .....	1,500	1	8/60	200
	Focus Group Interview Guide .....	48	1	1	48
Total .....	.....	.....	.....	.....	264

**Leroy A. 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. 2014-04136 Filed 2-25-14; 8:45 am]

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**DEPARTMENT OF HEALTH AND  
 HUMAN SERVICES**

**Centers for Disease Control and  
 Prevention**

[60Day-14-14KE]

**Proposed Data Collections Submitted  
 for Public Comment and  
 Recommendations**

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Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology. Written comments should be received within 60 days of this notice.

**Proposed Project**

A Comprehensive Evaluation of a Paid Social Media and Mass Media Gynecologic Cancer Campaign—New—

National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP), Centers for Disease Control and Prevention (CDC).

*Background and Brief Description*

In 2006, Congress passed The Gynecologic Cancer Education and Awareness Act (Pub. L. 111-324, "Johanna's Law") authorizing CDC to launch and evaluate a public health information campaign regarding gynecological cancers. The campaign, entitled "Inside Knowledge: Get the Facts About Gynecologic Cancer," seeks to increase women's intentions to seek medical attention for persistent symptoms that could be indicative of some of gynecological cancers, yet may sometimes be ignored or simply overlooked by women. The campaign is managed by the Division of Cancer Prevention and Control (DCPC) at the Centers for Disease Control and Prevention (CDC).

CDC plans to evaluate the Inside Knowledge campaign by collecting information from members of its target audience: adult women (ages 40-65) in the United States. Information will be collected through self-administered, Web-based surveys. Survey items will include measures of audience recall of the campaign; perceptions of campaign messages; gynecologic health related knowledge, attitudes, and beliefs; intentions to seek care for symptoms associated gynecologic cancers; and sociodemographic characteristics. Specifically, this information collection will allow CDC to assess exposure to campaign efforts and assess whether women who were exposed to the campaign have higher awareness of the campaign, higher knowledge of gynecological cancers, and greater intentions to seek medical attention for gynecologic cancer symptoms and/or to discuss symptoms with their doctor. The evaluation will also examine whether women's awareness of the campaign differs by channel of delivery.

To conduct the evaluation, we will augment the national Inside Knowledge campaign with an additional paid media campaign in two cities. Cities will be selected based on the following criteria: (1) Incidence/prevalence of gynecologic

cancer, (2) cost of mass media advertising, (3) size of the target audience in the city, (4) similarity in population size and demographics, and (5) previous Inside Knowledge campaign activities within the city. The two locations selected for this evaluation study will fall within the Nielsen 35-45 Designated Market Area (DMA) designations. The additional campaign advertising will include digital media and traditional media that will be implemented in flights, including the following: (1) A higher concentration in a defined time ("heavy up") of traditional media only, (2) digital media only, and (3) a combination of a "heavy up" along with digital media. Each city will be non-randomly assigned to a condition, i.e., the type (traditional or digital) and sequence of additional advertisements. Evaluation information will be collected at four time points in each city (a baseline survey plus up to three additional surveys after each flight of additional media). To reduce attrition and eliminate time-in-sample bias that would artificially increase measures of campaign recognition, we will use address-based, cross-sectional sampling methods to randomly select respondents for each survey. The address-based sampling will also increase the likelihood that respondents live within the cities where the media campaigns are implemented. Potential respondents will receive an advance letter that describes the study and provides a link to the survey Web site. The total number of respondents in each study location is approximately 2,424.

Results of this evaluation study will be used to inform CDC, policymakers, prevention practitioners, researchers, and the general U.S. population about the reach and impact of the Inside Knowledge gynecologic health awareness campaign, and to inform the development and implementation of future health communication efforts.

OMB approval is requested for one year. The same survey instrument will be used for all information collection.

Participation is voluntary and there are no costs to respondents other than their time.

**ESTIMATED ANNUALIZED BURDEN HOURS**

Type of respondents	Form name	Number of respondents	Number of responses per respondent	Average burden per response (in hr)	Total burden (in hr)
Women Ages 45-60 in City 1 .....	Women's Health Survey .....	2,424	1	20/60	808
Women Ages 45-60 in City 2 .....	Women's Health Survey .....	2,424	1	20/60	808