

Agency: DOL–BLS.

*Title of Collection:* Local Area Unemployment Statistics (LAUS) Program.

OMB Control Number: 1220–0017. Affected Public: State, Local, and

Tribal Governments. Total Estimated Number of

Respondents: 52.

Total Estimated Number of Responses: 95,569.

Total Estimated Annual Time Burden: 143,045 hours.

Total Estimated Annual Other Costs Burden: \$0.

Authority: 44 U.S.C. 3507(a)(1)(D).

Dated: April 26, 2021.

Mara Blumenthal,

Senior PRA Analyst. [FR Doc. 2021–09204 Filed 4–30–21; 8:45 am] BILLING CODE 4510–24–P

# DEPARTMENT OF LABOR

#### Agency Information Collection Activities; Submission for OMB Review; Comment Request; Medical Travel Refund Request

**AGENCY:** Department of Labor. **ACTION:** Notice of availability; request for comments.

**SUMMARY:** The Department of Labor (DOL) is submitting this Office of the Workers' Compensation Programs (OWCP)-sponsored information collection request (ICR) to the Office of Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act of 1995 (PRA). Public comments on the ICR are invited.

**DATES:** The OMB will consider all written comments that agency receives on or before June 2, 2021.

ADDRESSES: Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to www.reginfo.gov/public/do/ PRAMain. Find this particular information collection by selecting "Currently under 30-day Review—Open for Public Comments" or by using the search function.

Comments are invited on: (1) Whether the collection of information is

necessary for the proper performance of the functions of the Department, including whether the information will have practical utility; (2) if the information will be processed and used in a timely manner; (3) the accuracy of the agency's estimates of the burden and cost of the collection of information, including the validity of the methodology and assumptions used; (4) ways to enhance the quality, utility and clarity of the information collection; and (5) ways to minimize the burden of the collection of information on those who are to respond, including the use of automated collection techniques or other forms of information technology.

**FOR FURTHER INFORMATION CONTACT:** Mara Blumenthal by telephone at 202–

693–8538, or by email at *DOL\_PRA\_PUBLIC@dol.gov.* 

SUPPLEMENTARY INFORMATION: Form OWCP-957 is used to request reimbursement for out-of-pocket expenses incurred when traveling to medical providers for covered medical testing or treatment. Black Lung Benefits Act (BLBA), 30 U.S.C. 901, Employees **Occupational Illness Compensation** Program Act of 2000 (EEOICPA) 42 U.S.C. 7384, and the Federal Employees' Compensation Act (FECA), 5 U.S.C. 8101 authorize this information collection. For additional substantive information about this ICR, see the related notice published in the Federal Register on February 9, 2021 (86 FR 8805).

This information collection is subject to the PRA. A Federal agency generally cannot conduct or sponsor a collection of information, and the public is generally not required to respond to an information collection, unless the OMB approves it and displays a currently valid OMB Control Number. In addition, notwithstanding any other provisions of law, no person shall generally be subject to penalty for failing to comply with a collection of information that does not display a valid OMB Control Number. *See* 5 CFR 1320.5(a) and 1320.6.

DOL seeks PRA authorization for this information collection for three (3) years. OMB authorization for an ICR cannot be for more than three (3) years without renewal. The DOL notes that information collection requirements submitted to the OMB for existing ICRs receive a month-to-month extension while they undergo review.

Agency: DOL–ŎWCP.

*Title of Collection:* Medical Travel Refund Request.

OMB Control Number: 1240–0037. Affected Public: Individuals or Households.

Total Estimated Number of

Respondents: 34,703.

Total Estimated Number of Responses: 333,528. Total Estimated Annual Time Burden: 55,366 hours. Total Estimated Annual Other Costs Burden: \$193,446.

Authority: 44 U.S.C. 3507(a)(1)(D).

Dated: April 23, 2021.

Mara Blumenthal,

Senior PRA Analyst.

[FR Doc. 2021–09209 Filed 4–30–21; 8:45 am] BILLING CODE 4510–CR–P

# DEPARTMENT OF LABOR

#### **Bureau of Labor Statistics**

### Information Collection Activities; Comment Request

**AGENCY:** Bureau of Labor Statistics, Department of Labor.

**ACTION:** Notice of information collection; request for comment.

SUMMARY: The Department of Labor, as part of its continuing effort to reduce paperwork and respondent burden, conducts a pre-clearance consultation program to provide the general public and Federal agencies with an opportunity to comment on proposed and/or continuing collections of information in accordance with the Paperwork Reduction Act of 1995. This program helps to ensure that requested data can be provided in the desired format, reporting burden (time and financial resources) is minimized, collection instruments are clearly understood, and the impact of collection requirements on respondents can be properly assessed. Currently, the Bureau of Labor Statistics (BLS) is soliciting comments concerning the proposed reinstatement without change of the "Current Population Survey (CPS) Unemployment Insurance (UI) Non-Filer Supplement" to be conducted in February 2022 and May 2022. A copy of the proposed information collection request (ICR) can be obtained by contacting the individual listed below in the addresses section of this notice.

**DATES:** Written comments must be submitted to the office listed in the Addresses section of this notice on or before July 2, 2021.

ADDRESSES: Send comments to Erin Good, BLS Clearance Officer, Division of Management Systems, Bureau of Labor Statistics, Room 4080, 2 Massachusetts Avenue NE, Washington, DC 20212. Written comments may also be transmitted by email to *BLS\_PRA\_Public@bls.gov.*