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 application also will 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. 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 November 2, 1998.

A. Federal Reserve Bank of Chicago (Philip Jackson, Applications Officer) 230 South LaSalle Street, Chicago, Illinois 60690-1413:

1. Clarkston Financial Corporation, Clarkston, Michigan; to become a bank holding company by acquiring 100 percent of the voting shares of Clarkston State Bank, Clarkston, Michigan (in organization).

2. Community Shores Bank Corporation, Roosevelt Park, Michigan; to become a bank holding company by acquiring 100 percent of the voting shares of Community Shores Bank, Norton Shores, Michigan, a *de novo* bank.

3. PSB Corporation, Wellsburg, Iowa; to acquire 100 percent of the voting shares of Denver Ban Corporation, Denver, Iowa, and thereby indirectly acquire Denver Savings Bank, Denver, Iowa.

B. Federal Reserve Bank of Dallas (W. Arthur Tribble, Vice President) 2200 North Pearl Street, Dallas, Texas 75201-2272:

1. Texas Financial Bancorporation, Inc., Minneapolis, Minnesota; to acquire 100 percent of the voting shares of TNB Bancorporation, Inc., Brenham, Texas, and thereby indirectly acquire TNB Bancorporation of Delaware, Inc., Wilmington, Delaware, and Texas National Bank, Brenham, Texas.

Board of Governors of the Federal Reserve System, October 2, 1998.

Robert deV. Frierson,

Associate Secretary of the Board.

[FR Doc. 98–26985 Filed 10–7–98; 8:45 am]

BILLING CODE 6210–01–F

FEDERAL RESERVE SYSTEM

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

This notice corrects a notice (FR Doc. 98-24718) published on pages 49357 and 49358 of the issue for Tuesday, September 15, 1998.

Under the Federal Reserve Bank of Boston heading, the entry for Peoples Heritage Financial Group, Inc., Portland, Maine, is revised to read as follows:

A. Federal Reserve Bank of Boston (Richard Walker, Community Affairs Officer) 600 Atlantic Avenue, Boston, Massachusetts 02106-2204:

1. Peoples Heritage Financial Group, Inc., Portland, Maine; to merge with SIS Bancorp, Inc., Springfield, Massachusetts, and thereby indirectly acquire Springfield Institution for Savings, Springfield, Massachusetts, and Glastonbury Bank & Trust Company, Glastonbury, Connecticut.

In connection with this application, Peoples Heritage Merger Corp., Portland, Maine, has applied to become a bank holding company by acquiring 100 percent of the voting shares of Springfield Institution for Savings, Springfield, Massachusetts, and Glastonbury Bank & Trust Company, Glastonbury, Connecticut.

Comments on this application must be received by October 9, 1998.

Board of Governors of the Federal Reserve System, October 2, 1998.

Robert deV. Frierson,

Associate Secretary of the Board.

[FR Doc. 98–26986 Filed 10–7–98; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30DAY–01–99]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call the CDC Reports Clearance Officer at (404) 639–7090. Send written comments to CDC, Desk Officer; Human Resources and Housing Branch, New Executive Office Building, Room 10235; Washington, DC 20503. Written comments should be received within 30 days of this notice.

Proposed Project

1. Statement in Support of Application for Waiver of Inadmissibility—(0920–0006)—Extension—National Center for Infectious Disease Control and Prevention (NCID)—Section 212(a)(1) of the Immigration and Nationality Act states that aliens with specific health-related conditions are ineligible to receive visas and ineligible for admission into the United States. The Attorney General may waive application of this inadmissibility on health-related grounds if an application for waiver is filed and approved by the consular office considering the application for a visa. The Division of Quarantine, NCID uses this application primarily to collect information to establish and maintain records of waiver applicants in order to notify the Immigration and Naturalization Service (INS) when terms, conditions, and controls imposed by waiver are not met. We are requesting the extension of this data collection for three years. The total burden hours are 33.

Respondents	Number of respondents	Number of responses/respondents	Avg. burden/responses (in hrs.)
Businesses or Organizations	2001	1	.165

2. Gonococcal Isolate Surveillance Project (GISP) (0920–0307)—Extension—The Division of STD Prevention, National Center for HIV, STD and TB Prevention (NCHSTP) is requesting a 3-year extension of OMB clearance to continue the Gonococcal Isolate Surveillance Project (GISP). The objectives of GISP are: (1) to monitor trends in antimicrobial susceptibility of strains of *Neisseria gonorrhoeae* in the United States and (2) to characterize resistant isolates. GISP provides critical surveillance for antimicrobial resistance, allowing for informed

treatment recommendations. GISP was begun in 1986 as a voluntary surveillance project and now involves 5 regional laboratories and 26 publicly funded sexually transmitted disease clinics around the country. The STD clinics submit up to 25 gonococcal isolates per month to the regional laboratories, which measure susceptibility to a panel of antibiotics. Limited demographic and clinical information corresponding to the isolates are submitted directly by the clinics to CDC.

During 1986–1997, GISP has demonstrated the ability to effectively achieve its objectives. The recent emergence of resistance to fluoroquinolones, commonly used therapies for gonorrhea, has been identified through GISP and makes ongoing surveillance critical. Data gathered through GISP are used to alert the public health community to changes in antimicrobial resistance in *N. gonorrhoeae* which may impact treatment choices, and to guide recommendations made in CDC's STD Treatment Guidelines, which are published every several years. The total burden hours are 6196.

Respondent	Number of respondents	Number of responses/respondents	Avg. burden (in hrs.)
Laboratory	5	1056	1
Clinic	26	204	0.166

3. Annual Submission of the Quantity of Nicotine Contained in Smokeless Tobacco Products Manufactured, Imported, or Packaged in the United States—New—Oral use of smokeless tobacco represents a significant health risk which can cause cancer and a number of noncancerous oral conditions, and can lead to nicotine addiction and dependence. The Centers for Disease Control and Prevention's (CDC) Office on Smoking and Health (OSH) has been delegated the authority for implementing major components of the Department of Health and Human Services' (HHS) tobacco and health program, including collection of tobacco ingredients information. HHS's overall goal is to reduce death and disability resulting from cigarette smoking and other forms of tobacco use through programs of information, education and research.

The Comprehensive Smokeless Tobacco Health Education Act of 1986 (15 U.S.C. 4401 *et seq.*, Pub. L. 99–252) requires that each person who manufactures, packages, or imports smokeless tobacco provide the Secretary of HHS annually with a report on the quantity of nicotine contained in smokeless tobacco products. This notice implements this nicotine reporting requirement. CDC is requesting OMB clearance to collect this information for three years. A standard methodology for measurement of quantity of nicotine in smokeless tobacco has been developed. The methodology (''Protocol for Analysis of Nicotine, Total Moisture, and pH in Smokeless Tobacco Products'') is intended to provide standardized measurement of nicotine, total moisture, and pH in smokeless tobacco products.

Background

In 1989, the smokeless industry submitted a business review letter to the Department of Justice (DOJ), in accordance with 28 C.F.R. Section 50.6. This letter requested approval of a collaborative industry effort to determine standard nicotine reporting. In January 1993, DOJ extended permission to the smokeless industry to begin the development of uniform methods for analyzing smokeless tobacco products for nicotine or moisture content. The first meeting of the work group, which represented the ten major domestic manufacturers of smokeless tobacco, was convened on July 7, 1993. After a series of meetings of the joint industry work group, a standard methodology was approved by the work group and submitted to OSH for approval. The protocol was revised by OSH based on individual comments received from peer reviewers and the Division of Environmental Health Laboratory Sciences, National Center for Environmental Health, CDC. The total annual burden hours are 18766.*

Respondents	Number of respondents	Number of responses/respondent	Average burden/response (in hrs.)
Tobacco manufacturers	11	1	1,706

*Please note that these figures are based on the average reporting time and cost estimations for six major smokeless tobacco manufacturers as reported by Patton Boggs, LLP.

Charles W. Gollmar,

Acting Associate Director for Policy, Planning and Evaluation, Centers for Disease Control and Prevention (CDC).

[FR Doc. 98–26987 Filed 10–7–98; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Hospital Infection Control Practices Advisory Committee: Meeting

In accordance with section l0(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), the Centers for Disease Control and Prevention (CDC) announces the following meeting.

Name: Hospital Infection Control Practices Advisory Committee (HICPAC).

Times and Dates: 8:30 a.m.–5 p.m., November 16, 1998. 8:30 a.m.–12 p.m., November 17, 1998.

Place: CDC, Building 16, Room 1111/1111A, l600 Clifton Road, NE, Atlanta, Georgia 30333.

Status: Open to the public, limited only by the space available.

Purpose: The Committee is charged with providing advice and guidance to the Secretary, the Assistant Secretary for Health, the Director, CDC, and the Director, National Center for Infectious Diseases (NCID), regarding (1) the practice of hospital