Review, National Institute of General Medical Sciences, National Institutes of Health, 45 Center Drive, Room 3AN18B, Bethesda, MD 20892, 301–594–3663,

weidmanma@nigms.nih.gov.

This notice is being published less than 15 days prior to the meeting due to the timing limitations imposed by the review and funding cycle.

(Catalogue of Federal Domestic Assistance Program Nos. 93.375, Minority Biomedical Research Support; 93.821, Cell Biology and Biophysics Research; 93.859, Pharmacology, Physiology, and Biological Chemistry Research; 93.862, Genetics and Developmental Biology Research; 93.88, Minority Access to Research Careers; 93.96, Special Minority Initiatives, National Institutes of Health, HHS)

Dated: August 1, 2008.

Jennifer Spaeth,

Director, Office of Federal Advisory Committee Policy.

[FR Doc. E8–18271 Filed 8–8–08; 8:45 am]

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute on Aging; Notice of Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of a meeting of the National Advisory Council on Aging.

The meeting will be open to the public as indicated below, with attendance limited to space available. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify the Contact Person listed below in advance of the meeting.

The meeting will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Advisory Council on Aging.

Date: September 24–25, 2008. Closed: September 24, 2008, 3 p.m. to 5 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health, Building 31, 31 Center Drive, C Wing, Conference Room 6, Bethesda, MD 20892. Open: September 25, 2008, 8 a.m. to 2:15 p.m.

Agenda: Call to order and reports from the Task Force Minority Aging Research Report; Working Group on Program Report; and Program Highlights.

Place: National Institutes of Health, Building 31, 31 Center Drive, C Wing, Conference Room 6, Bethesda, MD 20892.

Closed: September 25, 2008, 2:15 p.m. to 2:45 p.m.

Agenda: To review and evaluate review of the Scientific Director.

Place: National Institutes of Health, Building 31, 31 Center Drive, C Wing, Conference Room 6, Bethesda, MD 20892.

Contact Person: Robin Barr, PhD, Director, National Institute on Aging, Office Of Extramural, Activities Gateway Building, 7201 Wisconsin Avenue, Bethesda, MD 20814, (301) 496–9322, barrr@nia.nih.gov.

Any interested person may file written comments with the committee by forwarding the statement to the Contact Person listed on this notice. The statement should include the name, address, telephone number and when applicable, the business or professional affiliation of the interested person.

In the interest of security, NIH has instituted stringent procedures for entrance onto the NIH campus. All visitor vehicles, including taxicabs, hotel, and airport shuttles will be inspected before being allowed on campus. Visitors will be asked to show one form of identification (for example, a government-issued photo ID, driver's license, or passport) and to state the purpose of their visit.

Information is also available on the Institute's/Center's home page: http://www.nih.gov/nia/naca/, where an agenda and any additional information for the meeting will be posted when available. (Catalogue of Federal Domestic Assistance Program Nos. 93.866, Aging Research, National Institutes of Health, HHS)

Dated: August 1, 2008.

Jennifer Spaeth,

Director, Office of Federal Advisory Committee Policy.

[FR Doc. E8–18273 Filed 8–8–08; 8:45 am]

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Allergy and Infectious Diseases; Notice of Closed Meetings

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the following meetings.

The meetings will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and

the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Institute of Allergy and Infectious Diseases, Special Emphasis Panel, R25 Science Education Awards.

Date: August 27, 2008.

Time: 8 a.m. to 12 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health, 6700B Rockledge Drive 3145, Bethesda, MD 20817 (Telephone Conference Call).

Contact Person: Ellen S. Buczko, PhD, Scientific Review Officer, Scientific Review Program, Division of Extramural Activities, National Institutes of Health/NIAID, 6700B Rockledge Drive, Room 3145 MSC 7616, Bethesda, MD 20892–7616, 301–451–2676, ebuczko1@niaid.nih.gov.

Name of Committee: National Institute of Allergy and Infectious Diseases, Special Emphasis Panel, Host Response to Pathogens.

Date: September 17, 2008.

Time: 11 a.m. to 2 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health, 6700B Rockledge Drive, Bethesda, MD 20817 (Telephone Conference Call).

Contact Person: Lynn Rust, PhD, Scientific Review Officer, Scientific Review Program, Division of Extramural Activities, NIAID/NIH/DHHS, Room 3120, 6700B Rockledge Drive, MSC 7616, Bethesda, MD 20892, 301–402–3938, lr228v@nih.gov.

(Catalogue of Federal Domestic Assistance Program Nos. 93.855, Allergy, Immunology, and Transplantation Research; 93.856, Microbiology and Infectious Diseases Research, National Institutes of Health, HHS)

Dated: July 31, 2008.

Jennifer Spaeth,

Director, Office of Federal Advisory Committee Policy.

[FR Doc. E8–18274 Filed 8–8–08; 8:45 am]

BILLING CODE 4140-01-M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

Proposed Matching Requirements for Specific SAMHSA Discretionary Grant Funding Opportunities

Authority: Sections 509, 516, and 520A of the Public Health Service Act.

AGENCY: Substance Abuse and Mental Health Services Administration, HHS. The PHS Act states the Secretary may require non-Federal matching funds to ensure the institutional commitment to

the projects funded under grant through cash or in kind donations from public or private entities including plant, equipment, or services.

ACTION: Notice of proposed matching requirements for specific SAMHSA discretionary grant funding opportunities.

SUMMARY: In fiscal year 2009, the Substance Abuse and Mental Health Services Administration (SAMHSA) plans to require matching funds for some discretionary grant funding opportunities within the Programs of Regional and National Significance as described in the President's Fiscal Year (FY) 2009 Budget Request. This notice describes the specific FY 2009 funding opportunities for which matching is proposed. We understand that some grantees could experience initial difficulty with the matching requirements. The goal of this solicitation is to seek comment so that we can design these activities to assist grantees in lessening these challenges over time.

DATES: Submit written comments on this proposal within 60 days from the date of publication.

ADDRESSES: Interested persons are invited to submit comments regarding SAMHSA proposed matching requirements to Shelly Hara, Office of Policy, Planning and Budget, SAMHSA, by fax (240) 276–2220 or by e-mail (matching@samhsa.hhs.gov). Please include a phone number in your correspondence so that SAMHSA staff may contact you if there are questions about your comments.

FOR FURTHER INFORMATION CONTACT: Shelly Hara, OPPB, SAMHSA, by fax (240) 276–2220 or e-mail (matching@samhsa.hhs.gov). If you would like a SAMHSA staff person to call you about your questions, please state this in your correspondence and provide a telephone number where you can be reached between 8:30 a.m. and 5 p.m., Eastern Standard Time.

SUPPLEMENTARY INFORMATION: SAMHSA has found that matching requirements assist grant communities in sustaining activities over the long term, help communities leverage resources (i.e., increasing the impact of grant-funded activities), and promote sustainability beyond the term for which Federal grant funding is provided. The FY 2009 President's Budget for SAMHSA includes matching requirements for several of SAMHSA's discretionary grant programs. Through matching requirements, grantees in these programs may be required to match the Federal dollars of the grant award with

their own funds and resources. This could include cash and/or in-kind contributions from State and local government, foundations, private non-profit and/or for-profit organizations. See below for a description of each program and the proposed matching requirements.

Although matching requirements have not been used extensively in SAMHSA's discretionary grant programs, statutory matching requirements in certain SAMHSA grant programs have yielded some promising results with regard to sustainability and leveraging resources:

- A sustainability study of grantees funded between 1993 and 1995 through the Center for Substance Abuse Treatment's (CSAT's) Residential Women and Children and Pregnant and Postpartum Women (RWC/PPW) program found that a majority of grantees met with some success in sustaining their programs in one form or another beyond the end of Federal funding. The study identified several factors that were positively associated with sustainability. A match requirement may encourage grantees to engage in some of these activities, including early and careful planning for sustainability and developing relationships with other potential funders.
- The Center for Mental Health Services' (CMHS') Comprehensive Community Mental Health Services for Children program, which funds interagency, community-based systems of care, requires that grantees provide matching funds through a graduated approach, with an increasing match requirement over time. For example, in the fifth and sixth year of the grant, matching is not less than \$2 for each \$1 of Federal funds. Some grantees have reported that matching requirements contribute to community sustainability efforts for systems of care. For sites funded in 1993 and 1994 and assessed for sustainability five years after funding, 80% of sites achieved sustainability.

SAMHSA understands that some Tribes and smaller organizations and communities may have some difficulties in meeting initial match requirements. However, we have included some alternatives to address these challenges, such as seeking a postponement of the matching requirement in the first year, with an increased match in the following year. Matching elements help ensure current efforts are continued in the future.

When matching requirements are included in a program, grantees must provide non-Federal funds in cash or inkind, fairly evaluated to match the

Federal funds provided through the grant award. The specific rate of the match varies from program to program and may vary over time. Matching funds must meet the same test of allowability as costs charged to Federal grants. Sources of matching funds include State and local governmental appropriations (non-Federal), grants awarded by foundations, and funding provided by other private non-profit or for-profit organizations. In-kind contributions may include facilities, equipment, or services used in direct support of the project.

SAMHSA is seeking comment on a proposed 20% matching requirement (i.e., \$2 for every \$10 in Federal grant funds) for the first year with a graduated match in the succeeding years for the following programs in the FY 2009 President's budget:

- A new Center for Substance Abuse Prevention (CSAP) Targeted Capacity Expansion program to help communities address emerging prevention needs identified by States and local communities. It is expected that \$7 million of Federal funds could support 14 new grants to be awarded to local governments, community-based organizations, and tribal entities. These grants are expected to expand or enhance a community's ability to provide rapid, strategic, comprehensive, and integrated prevention programs, practices, and strategies to specific, well-documented emerging needs.
- A new Center for Mental Health Services (CMHS) Targeted Capacity Expansion program to help communities address emerging mental health needs identified by local communities. It is expected that \$7.3 million of Federal funds could support 14 new grants to be awarded to State governments, local governments, communities, and tribal entities. These grants are expected to expand or enhance a community's ability to provide rapid, strategic, comprehensive, and integrated responses to specific, well-documented mental health capacity problems, including technical assistance.

The Center for Substance Abuse Treatment (CSAT) Screening, Brief Intervention, Referral, and Treatment (SBIRT) program for States, territories, Federally recognized Tribes and tribal organizations. The SBIRT program has been in existence since FY 2003. The purpose of the program is to integrate screening, brief intervention, referral, and treatment services within general medical and primary care settings.

SAMHSA also seeks public comment on the following questions related to the matching requirements:

- What benefits would you expect as a result of including a matching requirement in the programs listed above?
- How will the matching requirement increase the sustainability of the grant projects funded through these programs?
- How will the matching requirement increase the services supported through the grant projects funded through these programs?
- What other benefits can be expected?
- What challenges would you anticipate as a result of including a matching requirement in the programs listed above? What suggestions do you have to help minimize those challenges?
- -How would the benefits and challenges of the matching requirement change if the matching requirement were higher (e.g., 25% in year 1 and increasing in subsequent years)?
- -What is the highest point at which the match would be supportable for you/ your organization?
- -At what level (i.e., percent of the grant) would the cost of a matching requirement become a barrier to applying for a grant from SAMHSA?
- As an applicant, would you be interested in a provision that would allow you to choose to defer the matching requirement in the first year of the grant, with an offsetting increased match in later years of the grant? What are the benefits and challenges of such an approach?
- What other options for a matching requirement (e.g., different percentages) would you recommend that SAMHSA consider?

Toian Vaughn,

Public Health Analyst, Substance Abuse and Mental Health, Services Administration.

[FR Doc. E8-18473 Filed 8-8-08; 8:45 am]

BILLING CODE 4162-20-P

DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency

[FEMA-1771-DR]

Illinois Amendment No. 6 to Notice of a Major Disaster Declaration

AGENCY: Federal Emergency Management Agency, DHS.

ACTION: Notice.

SUMMARY: This notice amends the notice of a major disaster declaration for the State of Illinois (FEMA-1771-DR),

dated June 24, 2008, and related determinations.

DATES: Effective Date: July 30, 2008.

FOR FURTHER INFORMATION CONTACT:

Peggy Miller, Disaster Assistance Directorate, Federal Emergency Management Agency, 500 C Street, SW., Washington, DC 20472, (202) 646-3886.

SUPPLEMENTARY INFORMATION: The notice of a major disaster declaration for the State of Illinois is hereby amended to include the following area among those areas determined to have been adversely affected by the catastrophe declared a major disaster by the President in his declaration of June 24, 2008.

Greene County for Public Assistance.

The following Catalog of Federal Domestic Assistance Numbers (CFDA) are to be used for reporting and drawing funds: 97.030, Community Disaster Loans; 97.031, Cora Brown Fund; 97.032, Crisis Counseling; 97.033, Disaster Legal Services; 97.034, Disaster Unemployment Assistance (DUA); 97.046, Fire Management Assistance Grant; 97.048, Disaster Housing Assistance to Individuals and Households In Presidential Declared Disaster Areas: 97.049, Presidential Declared Disaster Assistance—Disaster Housing Operations for Individuals and Households; 97.050, Presidential Declared Disaster Assistance to Individuals and Households—Other Needs; 97.036, Disaster Grants—Public Assistance (Presidentially Declared Disasters); 97.039, Hazard Mitigation Grant.)

R. David Paulison,

Administrator, Federal Emergency Management Agency.

[FR Doc. E8-18437 Filed 8-8-08; 8:45 am] BILLING CODE 9110-10-P

DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency

[FEMA-1770-DR]

Nebraska; Amendment No. 3 to Notice of a Major Disaster Declaration

AGENCY: Federal Emergency Management Agency, DHS.

ACTION: Notice.

SUMMARY: This notice amends the notice of a major disaster declaration for the State of Nebraska (FEMA-1770-DR), dated June 20, 2008, and related determinations.

DATES: Effective Date: July 29, 2008.

FOR FURTHER INFORMATION CONTACT:

Peggy Miller, Disaster Assistance Directorate, Federal Emergency Management Agency, 500 C Street, SW., Washington, DC 20472, (202) 646-3886. **SUPPLEMENTARY INFORMATION:** The notice of a major disaster declaration for the State of Nebraska is hereby amended to include the following areas among those areas determined to have been adversely affected by the catastrophe declared a major disaster by the President in his declaration of June 20, 2008.

Holt County for Individual Assistance (already designated for Public Assistance.) Wheeler County for Public Assistance.

(The following Catalog of Federal Domestic Assistance Numbers (CFDA) are to be used for reporting and drawing funds: 97.030, Community Disaster Loans; 97.031, Cora Brown Fund; 97.032, Crisis Counseling; 97.033, Disaster Legal Services; 97.034 Disaster Unemployment Assistance (DUA); 97.046, Fire Management Assistance Grant; 97.048, Disaster Housing Assistance to Individuals and Households In Presidential Declared Disaster Areas; 97.049, Presidential Declared Disaster Assistance—Disaster Housing Operations for Individuals and Households; 97.050, Presidential Declared Disaster Assistance to Individuals and Households—Other Needs: 97.036, Disaster Grants—Public Assistance (Presidentially Declared Disasters); 97.039, Hazard Mitigation Grant.)

R. David Paulison,

Administrator, Federal Emergency Management Agency.

[FR Doc. E8-18424 Filed 8-8-08; 8:45 am]

BILLING CODE 9110-10-P

DEPARTMENT OF HOMELAND SECURITY

Federal Emergency Management Agency

[FEMA-1781-DR]

Idaho; Major Disaster and Related **Determinations**

AGENCY: Federal Emergency Management Agency, DHS.

ACTION: Notice.

SUMMARY: This is a notice of the Presidential declaration of a major disaster for the State of Idaho (FEMA-1781-DR), dated July 31, 2008, and related determinations.

DATES: Effective Date: July 31, 2008.

FOR FURTHER INFORMATION CONTACT:

Peggy Miller, Disaster Assistance Directorate, Federal Emergency Management Agency, 500 C Street, SW., Washington, DC 20472, (202) 646-3886.

SUPPLEMENTARY INFORMATION: Notice is hereby given that, in a letter dated July 31, 2008, the President declared a major disaster under the authority of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, 42 U.S.C. 5121-5207 (the Stafford Act), as follows: