

member of the immediate family) must provide a written consent before disinterment is granted. VA will accept an order from a court of local jurisdiction in lieu of VA Form 40-4970.

An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The **Federal Register** Notice with a 60-day comment period soliciting comments on this collection of information was published on March 29, 2010, at pages 15494-15495.

*Affected Public:* Individuals or households.

*Estimated Annual Burden:* 55.

*Estimated Average Burden Per*

*Respondent:* 10 minutes.

*Frequency of Response:* On occasion.

*Estimated Number of Respondents:* 329.

Dated: June 2, 2010.

By direction of the Secretary.

**Denise McLamb,**

*Program Analyst, Enterprise Records Service.*

[FR Doc. 2010-13598 Filed 6-7-10; 8:45 am]

**BILLING CODE 8320-01-P**

## DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900-New (VA Form 10-0503)]

### Agency Information Collection (Dental Patient Satisfaction Survey) Activities Under OMB Review

**AGENCY:** Veterans Health Administration, Department of Veterans Affairs.

**ACTION:** Notice.

**SUMMARY:** In compliance with the Paperwork Reduction Act (PRA) of 1995 (44 U.S.C. 3501-3521), this notice announces that the Veterans Health Administration, Department of Veterans Affairs, will submit the collection of information abstracted below to the Office of Management and Budget (OMB) for review and comment. The PRA submission describes the nature of the information collection and its expected cost and burden; it includes the actual data collection instrument.

**DATES:** Comments must be submitted on or before *July 8, 2010*.

**ADDRESSES:** Submit written comments on the collection of information through <http://www.Regulations.gov>; or to VA's OMB Desk Officer, OMB Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, DC 20503 (202) 395-7316. Please refer to "OMB Control No. 2900-

New (VA Form 10-0503)" in any correspondence.

**FOR FURTHER INFORMATION CONTACT:**

Denise McLamb, Enterprise Records Service (005R1B), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420, (202) 461-7485, FAX (202) 273-0443 or e-mail [denise.mclamb@va.gov](mailto:denise.mclamb@va.gov). Please refer to "OMB Control No. 2900-New (VA Form 10-0503)."

*Title:* Survey of Healthcare Experiences, Dental Patient Satisfaction Survey, VA Form 10-0503.

*OMB Control Number:* 2900-New (VA Form 10-0503).

*Type of Review:* New collection.

*Abstract:* VA Form 10-0503 will be used to obtain information needed to identify problem areas in dental health care services.

An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The **Federal Register** Notice with a 60-day comment period soliciting comments on this collection of information was published on April 2, 2010, at page 16912.

*Affected Public:* Individuals or households.

*Estimated Annual Burden:* 36,585.

*Estimated Average Burden Per*

*Respondent:* 15 minutes.

*Frequency of Response:* On occasion.

*Estimated Number of Respondents:* 9,146.

Dated: June 2, 2010.

By direction of the Secretary.

**Denise McLamb,**

*Program Analyst, Enterprise Records Service.*

[FR Doc. 2010-13599 Filed 6-7-10; 8:45 am]

**BILLING CODE 8320-01-P**

## DEPARTMENT OF VETERANS AFFAIRS

[OMB Control No. 2900-0325]

### Agency Information Collection (Certificate of Delivery of Advance Payment and Enrollment) Activities Under OMB Review

**AGENCY:** Veterans Benefits Administration, Department of Veterans Affairs.

**ACTION:** Notice.

**SUMMARY:** In compliance with the Paperwork Reduction Act (PRA) of 1995 (44 U.S.C. 3501-3521), this notice announces that the Veterans Benefits Administration (VBA), Department of Veterans Affairs, will submit the collection of information abstracted below to the Office of Management and

Budget (OMB) for review and comment. The PRA submission describes the nature of the information collection and its expected cost and burden; it includes the actual data collection instrument.

**DATES:** Comments must be submitted on or before July 8, 2010.

**ADDRESSES:** Submit written comments on the collection of information through <http://www.Regulations.gov> or to VA's OMB Desk Officer, OMB Human Resources and Housing Branch, New Executive Office Building, Room 10235, Washington, DC 20503 (202) 395-7316. Please refer to "OMB Control No. 2900-0325" in any correspondence.

**FOR FURTHER INFORMATION CONTACT:**

Denise McLamb, Enterprise Records Service (005R1B), Department of Veterans Affairs, 810 Vermont Avenue, NW., Washington, DC 20420, (202) 461-7485, FAX (202) 273-0443 or e-mail [denise.mclamb@va.gov](mailto:denise.mclamb@va.gov). Please refer to "OMB Control No. 2900-0325."

**SUPPLEMENTARY INFORMATION:**

*Title:* Certificate of Delivery of Advance Payment and Enrollment, VA Form 22-1999V.

*OMB Control Number:* 2900-0325.

*Type of Review:* Extension of a currently approved collection.

*Abstract:* VA will make payments of educational assistance in advance when the veteran, servicemember, reservist, or eligible person has specifically requested such payment. The school in which a student is accepted or enrolled delivers the advance payment to the student and is required to certify the deliveries to VA. VA Form 22-1999V serves as the certificate of delivery of advance payment and to report any changes in a student's training status. Schools are required to report when a student fails to enroll; has an interruption or termination of attendance; or unsatisfactory attendance, conduct or progress to VA.

An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The **Federal Register** Notice with a 60-day comment period soliciting comments on this collection of information was published on April 2, 2010, at pages 16911-16912.

*Affected Public:* State, Local or Tribal Government.

*Estimated Annual Burden:* 35 hours.

*Estimated Average Burden Per*

*Respondent:* 5 minutes.

*Frequency of Response:* On occasion.

*Estimated Number of Respondents:* 64.

*Estimated Total Number of Respondents:* 425.

Dated: June 2, 2010.