FEDERAL TRADE COMMISSION

Revised Jurisdictional Thresholds for Section 8 of the Clayton Act

AGENCY: Federal Trade Commission.

ACTION: Notice.

SUMMARY: The Federal Trade Commission announces the revised thresholds for interlocking directorates required by the 1990 amendment of section 8 of the Clayton Act. Section 8 prohibits, with certain exceptions, one person from serving as a director or officer of two competing corporations if two thresholds are met. Competitor corporations are covered by Section 8 if each one has capital, surplus, and undivided profits aggregating more than $10,000,000, with the exception that no corporation is covered if the competitive sales of either corporation are less than $1,000,000. Section 8(a)(5) requires the Federal Trade Commission to revise those thresholds annually, based on the change in gross national product. The new thresholds, which take effect immediately, are $20,090,000 for section 8(a)(1), and $2,009,000 for section 8(a)(2).


By direction of the Commission.

Donald S. Clark,
Secretary.

[FR Doc. 04–1647 Filed 1–26–04; 8:45 am]
BILLING CODE 1610–02–M

GENERAL SERVICES ADMINISTRATION

Maximum Per Diem Rates for Georgia; G–8 Summit

AGENCY: Office of Governmentwide Policy, General Services Administration (GSA).

ACTION: Notice of Per Diem Bulletin 04–2, temporarily revised continental United States (CONUS) per diem rates.

SUMMARY: As a result of the G–8 Summit, lodging and meal rates have increased in Sea Island, St. Simons Island and Jekyll Island (Glynn County) and Savannah (Chatham County), Georgia. A special per diem rate has been established that will apply to claims for reimbursement covering travel during the period February 1, 2004, through August 1, 2004, for U.S. Government employees and members of the uniformed services attending and/or participating in the G–8 Summit. The special per diem rate prescribed in bulletin 04–2 may be found at http://www.gsa.gov/permilem.

DATES: This notice is effective from February 1, 2004, to August 15, 2004, and applies to travel during the period of February 1 through August 1, 2004.


SUPPLEMENTARY INFORMATION: Title 5 United States Code, section 5702 permits the Administrator of General Services to establish per diem rates for official travel within the continental United States. The head of an agency may request the establishment of a higher rate when special or unusual circumstances result in an extreme increase in subsistence costs for a temporary period. This higher rate temporarily changes the maximum per diem amounts announced in the Federal Register at 68 FR 52035, August 29, 2003, for the following locations:

State of Georgia

Sea Island, St. Simons Island and Jekyll Island, including Glynn County. Savannah, including Chatham County.


Becky Rhodes,
Deputy Associate Administrator.

[FR Doc. 04–1599 Filed 1–26–04; 8:45 am]
BILLING CODE 6220–14–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Office of the Secretary

Amendment To Extend the January 24, 2003, Declaration Regarding Administration of Smallpox Countermeasures

AGENCY: Office of the Secretary (OS), Department of Health and Human Services (HHS).

ACTION: Notice.

SUMMARY: Concern that terrorists may have access to the smallpox virus and attempt to use it against the American public and United States Government facilities abroad continues to exist. The January 24, 2003, declaration regarding administration of smallpox countermeasures is revised to incorporate statutory definitions from the Smallpox Emergency Personnel Protection Act of 2003 and extended for one year until and including January 23, 2005.

DATES: This notice and the attached amendment are effective as of January 24, 2004.

FOR FURTHER INFORMATION CONTACT: William F. Raub, PhD, Acting Assistant Secretary for the Office of Public Health Emergency Preparedness, Office of the Secretary, Department of Health and Human Services, 200 Independence Avenue, SW., Washington, DC 20201, Telephone (202) 690–5760 (this is not a toll-free number).

SUPPLEMENTARY INFORMATION: Section 224(p) of the Public Health Service Act, which was established by section 304 of the Homeland Security Act of 2002 and amended by section 3 of the Smallpox Emergency Personnel Protection Act of 2003 (“SEPPA”), is intended to alleviate certain liability concerns associated with administration of smallpox countermeasures and, therefore, ensure that the countermeasures are available and can be administered in the event of a smallpox-related actual or potential
public health emergency such as a bioterrorist incident.

On January 24, 2003, due to concerns that terrorists may have access to the smallpox virus and attempt to use it against the American public and U.S. Government facilities abroad, the Secretary issued a declaration making section 224’s legal protections available. The declaration was effective until and including January 23, 2004; it included in section VI a number of definitions, which are no longer appropriate because of the statutory amendments in section 3 of SEPPA. The Secretary issues the amendment below to: (1) Delete the section VI definitions, and (2) extend the January 24, 2003, declaration pursuant to section 224(p)(2)(A) of the Public Health Service Act. In deleting the definitions, the Secretary does not intend to adopt an interpretation of the statutory amendments as limiting or denying the remedy of section 224(a) in any situation where it would have been available under the statute as originally enacted and the January 24, 2003, declaration.

Amendment To Extend January 24, 2003 Declaration Regarding Administration of Smallpox Countermeasures

I. Policy Determination: The underlying policy determinations of the January 24, 2003 declaration continue to exist, including the heightened concern that terrorists may have access to the smallpox virus and attempt to use it against the American public and U.S. Government facilities abroad.

II. Amendment of Declaration: I, Tommy G. Thompson, Secretary of the Department of Health and Human Services, have concluded, in accordance with the authority vested in me under section 224(p)(2)(A) of the Public Health Service Act, that a potential bioterrorist incident makes it advisable to extend the January 24, 2003 declaration regarding administration of smallpox countermeasures until and including January 23, 2005. The January 24, 2003, declaration as hereby amended may be further amended as circumstances require.

III. Definitions: The definitions of the January 24, 2003 declaration are deleted; terms that are used in the declaration and that are defined in section 224(p) of the Public Health Service Act shall have the meanings given in those definitions.

IV. Effective Dates: This extension is effective January 24, 2004 until and including January 23, 2005. The effective period may be extended or shortened by subsequent amendment to the January 24, 2003, declaration as hereby amended.


Tommy G. Thompson,
Secretary.

[FR Doc. 04–1631 Filed 1–26–04; 8:45 am]

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. 2003N–0575]

Agency Information Collection Activities; Proposed Collection; Comment Request; 2004 National Tracking Survey of Prescription Drug Information Provided to Patients

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice.

SUMMARY: The Food and Drug Administration (FDA) is announcing an opportunity for public comment on the proposed collection of certain information by the agency. Under the Paperwork Reduction Act of 1995 (the PRA), Federal agencies are required to publish notice in the Federal Register concerning each proposed collection of information, including each proposed extension of an existing collection of information, and to allow 60 days for public comment in response to the notice. This notice solicits comments on a national tracking survey, conducted every 2 years, of prescription drug information received by patients.

DATES: Submit written or electronic comments on the collection of information by March 29, 2004.

ADDRESSES: Submit electronic comments on the collection of information to http://www.fda.gov/dockets/ecomments. Submit written comments on the collection of information to the Division of Dockets Management (HFA–305), Food and Drug Administration, 5630 Fishers Lane, rm. 1061, Rockville, MD 20852. All comments should be identified with the docket number found in brackets in the heading of this document.


SUPPLEMENTARY INFORMATION: Under the PRA (44 U.S.C. 3501–3520), Federal agencies must obtain approval from the Office of Management and Budget (OMB) for each collection of information they conduct or sponsor.

“Collection of information” is defined in 44 U.S.C. 3502(3) and 5 CFR 1320.3(c) and includes agency requests or requirements that members of the public submit reports, keep records, or provide information to a third party. Section 3506(c)(2)(A) of the PRA (44 U.S.C. 3506(c)(2)(A)) requires Federal agencies to provide a 60-day notice in the Federal Register concerning each proposed collection of information, including each proposed extension of an existing collection of information, before submitting the collection to OMB for approval. To comply with this requirement, FDA is publishing notice of the proposed collection of information listed below.

With respect to the following collection of information, FDA invites comments on: (1) Whether the proposed collection of information is necessary for the proper performance of FDA’s functions, including whether the information will have practical utility; (2) the accuracy of FDA’s estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (3) ways to enhance the quality, utility, and clarity of the information to be collected; and (4) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques, when appropriate, and other forms of information technology.

2004 National Tracking Survey of Prescription Drug Information Provided to Patients

FDA implements the provisions of the Federal Food, Drug, and Cosmetic Act (the act) designed to assure the adequate labeling of prescription (Rx) drugs. Under section 502(a) of the act (21 U.S.C. 352(a)), a drug product is misbranded if its labeling is false or misleading in any particular, and under section 201(n) of the act (21 U.S.C. 321(n)), a drug’s labeling is misleading if its labeling or advertising fails to reveal material facts. FDA also has the authority to collect this information under Title VI of Public Law 104–180 (Related Agencies and Food and Drug Administration) section 601 (Effective Medication Guides), which directs the development of “a mechanism to assess periodically * * * the frequency with which the [oral and written prescription] information is provided to consumers.”

To assure that Rx drugs are not misbranded, FDA has historically asserted that adequate labeling requires certain information be provided to patients. In 1982, when FDA revoked a planned initiative to require mandatory patient package inserts for all Rx drugs