1. RBC Centura Banks, Inc.,, Raleigh, North Carolina, and its parent companies, Royal Bank of Canada, Montreal, Quebec; Royal Bank Holding Inc., Toronto, Ontario; RBC Holdings (USA) Inc., New York, New York; RBC USA Holdco Corporation, New York, New York; RBC Holdings (Delaware) Inc., Wilmington, Delaware; Prism Financial Corporation, Chicago, Illinois; and FLAG Acquisition Sub, Inc., Rocky Mount, North Carolina; to acquire 100 percent of the voting shares of FLAG Financial Corporation, Atlanta, Georgia, and thereby indirectly acquire FLAG Bank, Atlanta, Georgia.

Board of Governors of the Federal Reserve System, September 14, 2006.

Robert deV. Frierson.

Deputy Secretary of the Board. [FR Doc. E6–15549 Filed 9–18–06; 8:45 am] BILLING CODE 6210–01–S

FEDERAL TRADE COMMISSION

SES Performance Review Board

AGENCY: Federal Trade Commission. **ACTION:** Notice.

SUMMARY: Notice is hereby given of the appointment of members to the FTC Performance Review Board.

FOR FURTHER INFORMATION CONTACT:

Georgia Koliopoulos, Director of Human Resources, 600 Pennsylvania Avenue, NW., Washington, DC 20580, (202) 326– 2364

SUPPLEMENTARY INFORMATION:

Publication of the Performance Review Board (PRB) membership is required by 5 U.S.C. 4314(c)(4). The PRB reviews and evaluates the initial appraisal of a senior executive's performance by the supervisor, and makes recommendations regarding performance ratings, performance awards, and pay-for-performance pay adjustments to the Chairman.

The following individuals have been designated to serve on the Commission's Performance Review Board:

Charles H. Schneider, Executive Director, Chairman;

Jeffrey Schmidt, Director, Bureau of Competition;

Lydia B. Parnes, Director, Bureau of Consumer Protection;

William Blumenthal, General Counsel;

Pauline M. Ippolito, Associate Director, Bureau of Economics.

By direction of the Commission.

Donald S. Clark,

Secretary.

[FR Doc. E6–15541 Filed 9–18–06; 8:45 am] BILLING CODE 6750–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Announcement of Availability of Funds for Cooperative Agreement To Provide Technical Assistance and Support to the Afghan Ministry of Public Health (MOPH) in Strengthening the Management of the Women's and Children's Hospitals in Kabul, Afghanistan

AGENCY: Office of Global Health Affairs, Office of the Secretary, Department of Health and Human Services (DHHS). **ACTION:** Notice.

Announcement Type: Single Eligibility—FY 2006 Initial Announcement.

Funding Opportunity Number: OGHA 06–025.

GSA Catalog Of Federal Domestic Assistance: 93.017.

KEY DATES: September 19, 2006, Application Availability. September 26, 2006, Optional Letter of Intent due by 5 p.m. e.t. October 4, 2006, Applications due by 5 p.m. e.t.

due by 5 p.m. e.t.

SUMMARY: In partnership with the Afghan Ministry of Public Health (MOPH), the Office of Global Health Affairs (OGHA) within the U.S. Department of Health and Human Services (HHS), announces that up to \$1,750,000 in Fiscal Year (FY) 2006 funds is available for ONE (1) cooperative agreement to provide support as a single-source performancebased cooperative agreement to provide the Afghan MOPH with direct support for the development of a regional network of Maternal-Child Care including community health centers, polyclinics and secondary and tertiary hospitals in Kabul for the purpose of coordinating planning and program development. The primary goal of this project is to improve the quality of care at women's and children's health institutions in Afghanistan. HHS/OGHA anticipates substantial HHS scientific and programmatic involvement in the administration of the qualityimprovement program. The project will be for a program period of three (3) years, and individual budget periods of one (1) year, for a total of \$1,750,000.

I. Funding Opportunity Description

Authority: Department of Health and Human Services Appropriations Act, 2006, Title II, Pub. L. No. 109–149, 119 Stat. 2833, 2844 (2005) and section 103(a)(4)(H) of the Afghan Freedom Support Act, 2002, Pub. L. 107–327, 116 Stat. 2797.

Purposes of the Agreement

HHS, in partnership with other relevant U.S. Government departments

and agencies, anticipates involvement in the development, administration and oversight of this program to improve hospital-management capacity within the Afghan MOPH. The program will be for a program period of three (3) years and individual budget periods of one (1) year. Approximately a total of \$1,750,000 will be available for the three-year program period.

This cooperative agreement complements and builds upon the work of the Afghan MOPH Hospital Management Task Force (HMTF) and its efforts to implement the Essential Package of Hospital Services (EPHS) and the recommendations of the Joint U. S. Government/Afghan MOPH health-facility management planning team, as outlined above. Implementation and adherence to recognized evidence-based health-care and facility-management standards will be essential elements of a successful proposal.

The primary goal of this project is to organize and establish a seamless and sustainable integration system for the delivery of the full range of quality prenatal, intrapartum, postpartum care, including health promotion, prevention, maintenance and professional care for pregnant women and their neonates. While this agreement is focused on Kabul, the Afghan MOPH has the ultimate goal of implementing this model in other Provinces.

The integration will promote a twoway referral system to originate and end at the community level in the Comprehensive Health Centers and Polyclinics, with appropriate care provided at the secondary- and tertiarycare hospitals in Afghanistan.

This system will ensure the provision of the continuum of care in Kabul, including ambulatory care, acute care, and possibly home care and home visits.

A second goal is to ensure that care at the horizontal level is also appropriate, and that a workable and effective linkage exists between the maternity, newborn and pediatric secondary- and tertiary-care hospitals.

A third goal is to develop an interface between public central, regional and local health systems and the emerging private-sector health sector.

A fourth goal is to develop a mechanism whereby there is a rationalization method that provides for the sharing of care, the consolidation and coordination of clinical care and the joint planning for the future development of maternal, neonate and pediatric care within Kabul City.

In consultation with OGHA, the Afghan MOPH will set the vision and direction for the health system, will outline the priorities, will create the