

AMENDMENT NO. 2067

At the request of Mr. GARDNER, the name of the Senator from Texas (Mr. CORNYN) was added as a cosponsor of amendment No. 2067 intended to be proposed to S. 4049, an original bill to authorize appropriations for fiscal year 2021 for military activities of the Department of Defense, for military construction, and for defense activities of the Department of Energy, to prescribe military personnel strengths for such fiscal year, and for other purposes.

AMENDMENT NO. 2244

At the request of Mr. CORNYN, the name of the Senator from Indiana (Mr. YOUNG) was added as a cosponsor of amendment No. 2244 intended to be proposed to S. 4049, an original bill to authorize appropriations for fiscal year 2021 for military activities of the Department of Defense, for military construction, and for defense activities of the Department of Energy, to prescribe military personnel strengths for such fiscal year, and for other purposes.

AMENDMENT NO. 2252

At the request of Mr. MERKLEY, his name was added as a cosponsor of amendment No. 2252 intended to be proposed to S. 4049, an original bill to authorize appropriations for fiscal year 2021 for military activities of the Department of Defense, for military construction, and for defense activities of the Department of Energy, to prescribe military personnel strengths for such fiscal year, and for other purposes.

At the request of Mr. WYDEN, his name was added as a cosponsor of amendment No. 2252 intended to be proposed to S. 4049, supra.

AMENDMENT NO. 2341

At the request of Mr. WYDEN, the name of the Senator from Oregon (Mr. MERKLEY) was added as a cosponsor of amendment No. 2341 proposed to S. 4049, an original bill to authorize appropriations for fiscal year 2021 for military activities of the Department of Defense, for military construction, and for defense activities of the Department of Energy, to prescribe military personnel strengths for such fiscal year, and for other purposes.

AMENDMENT NO. 2364

At the request of Mr. RUBIO, the names of the Senator from California (Mrs. FEINSTEIN), the Senator from South Dakota (Mr. ROUNDS), the Senator from Alabama (Mr. JONES), the Senator from Nevada (Ms. CORTEZ MASTO), the Senator from Wisconsin (Ms. BALDWIN), the Senator from Minnesota (Ms. KLOBUCHAR) and the Senator from Montana (Mr. TESTER) were added as cosponsors of amendment No. 2364 intended to be proposed to S. 4049, an original bill to authorize appropriations for fiscal year 2021 for military activities of the Department of Defense, for military construction, and for defense activities of the Department of Energy, to prescribe military personnel strengths for such fiscal year, and for other purposes.

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mr. SCHUMER (for himself and Mrs. GILLIBRAND):

S. 4219. A bill to extend the special air traffic rule for civil helicopters operating VFR along the North Shore, Long Island, New York, to require the Administrator of the Federal Aviation Administration to promulgate a new special air traffic rule, and for other purposes; to the Committee on Commerce, Science, and Transportation.

Mr. SCHUMER. Mr. President, I ask unanimous consent that the text of the bill be printed in the RECORD.

There being no objection, the text of the bill was ordered to be printed in the RECORD, as follows:

S. 4219

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE.

This Act may be cited as the "Long Island All-Water Helicopter Route Act of 2020".

SEC. 2. LONG ISLAND, NEW YORK, NORTH SHORE AND SOUTH SHORE HELICOPTER ROUTES.

(a) EXTENSION OF SPECIAL AIR TRAFFIC RULE FOR NORTH SHORE.—Notwithstanding the ending date for the period described in section 93.101 of title 14, Code of Federal Regulations, the special air traffic rule for civil helicopters operating VFR along the North Shore, Long Island, New York, in effect under subpart H of part 93 of title 14, Code of Federal Regulations, on August 6 2020, shall remain in effect through the day before the date on which the final version of the special air traffic rule promulgated under subsection (b) is published.

(b) RULEMAKING PROCEEDING.—

(1) IN GENERAL.—The Administrator of the Federal Aviation Administration (in this section referred to as the "Administrator") shall conduct a rulemaking proceeding to promulgate a special air traffic rule for civil helicopters operating VFR along the North Shore and South Shore of Long Island, New York, in accordance with the requirements of this subsection.

(2) REQUIREMENTS.—The special air traffic rule promulgated under this subsection shall require the following:

(A) NORTH SHORE HELICOPTER ROUTE.—Each person who pilots a civil helicopter operating VFR along Long Island, New York's northern shoreline between the VPLYD waypoint and Plum Island shall—

(i) based on the most recently published editions by the Federal Aviation Administration of the New York Helicopter Route Chart and the Northeast Aeronautical Chart Bulletin, adhere to an all-water North Shore Helicopter Route that includes operating around Orient Point, Shelter Island, and Plum Island;

(ii) mitigate noise by flying at least 1 mile from the shoreline and at an altitude of not less than 2,500 feet mean sea level; and

(iii) prohibit deviations from the North Shore Helicopter Route for purposes of transitioning to or from a destination or point of landing when departing from or arriving to locations east of longitude 72°16'04" W.

(B) SOUTH SHORE HELICOPTER ROUTE.—Each person who pilots a civil helicopter operating VFR along Long Island, New York's southern shoreline between Breezy Point Jetty and the VPMLT waypoint shall—

(i) based on the most recently published editions by the Federal Aviation Administra-

tion of the New York Helicopter Route Chart and the Northeast Aeronautical Chart Bulletin, adhere to an all-water South Shore Helicopter Route; and

(ii) mitigate noise by flying at least 1 mile from the shoreline and at an altitude of not less than 2,500 feet mean sea level.

(C) EXCEPTIONS.—A person who pilots a civil helicopter operating VFR along Long Island, New York's northern shoreline or southern shoreline may deviate from the North Shore Helicopter Route or South Shore Helicopter Route—

(i) when necessary for safety or weather conditions; or

(ii) except as prohibited under subparagraph (A)(iii), when transitioning to or from a destination or point of landing.

(D) FLIGHT REPORT.—

(i) SUBMISSION.—If safety or weather conditions cause a person piloting a civil helicopter operating VFR to deviate from the North Shore Helicopter Route or South Shore Helicopter Route, the person shall submit a 1-page report to the Administrator identifying the condition not later than 14 days after landing.

(ii) PUBLIC DATABASE.—The Administrator shall make the reports submitted under clause (i) publically available in an online searchable database.

(3) DEADLINES.—

(A) RULEMAKING PROCEEDING.—Not later than 90 days after the date of enactment of this Act, the Administrator shall publish a notice of proposed rulemaking to carry out the requirements of this section.

(B) PUBLIC COMMENT PERIOD.—The Administrator shall provide notice of, and an opportunity for, at least 30 days of public comment on the special air traffic rule promulgated under this subsection.

(C) EFFECTIVE DATE OF SPECIAL AIR TRAFFIC RULE.—Not later than May 1, 2021, the Administrator shall publish a final version of the special air traffic rule promulgated under this subsection which shall take effect upon publication.

(c) REPEAL.—Effective on the date on which the final version of the special air traffic rule promulgated under subsection (b) is published by the Administrator, subpart H of part 93 of title 14, Code of Federal Regulations, is repealed.

By Mr. ALEXANDER:

S. 4231. A bill to strengthen and sustain on-shore manufacturing capacity and State stockpiles, and to improve the Strategic National Stockpile; to the Committee on Health, Education, Labor, and Pensions.

Mr. ALEXANDER. Mr. President, our great country has developed a dangerous habit when it comes to pandemics. Public health experts call it panic, neglect, panic.

In 2007, after the emergence of the Asian flu, former Utah Governor Mike Leavitt, who was then the Secretary of Health and Human Services, put it this way:

Everything we do before a pandemic seems alarmist. Everything we do after a pandemic will seem inadequate. This is the dilemma we face, but it should not stop us from doing what we can to prepare.

That was Governor Mike Leavitt.

Fifteen years ago, then-majority leader of the U.S. Senate, Dr. Bill Frist, told me and told our committee—he made 20 speeches predicting this—that a viral pandemic was no longer a question of if but a question of

when. Now, this is in the 2005–2006 era, 15 years ago.

He recommended then, Dr. Frist did, what he called a six-point public health prescription to minimize the blow: communication, surveillance, antivirals, vaccines, research, stockpile/surge capacity.

Four Presidents of the United States and several Congresses have done some of what needed to be done to prepare for pandemics but not enough of it. There is substantial agreement on all sides about what to do. There is even more agreement that, if we wait until this pandemic is over to do it, we will fall into the familiar cycle of panic, neglect, panic.

So the obvious thing for this Congress to do now, this month, while we are in the middle of a pandemic, while we have our eye on the ball, before we lose our focus, while we are spending \$4 trillion or more mostly to repair the damage caused by this pandemic, is that we should authorize and spend the few billions that it takes to be prepared for the next pandemic.

That is why I am introducing today the Preparing for the Next Pandemic Act, and that would take three of the most obvious steps about which there is near universal agreement: One, make certain that we have and maintain sufficient manufacturing capacity within the United States to produce tests, treatments, and vaccines so that we don't have to rely on manufacturing plants in China and India or any foreign country.

Now, how difficult is that to decide? Do we really want our vaccines made in China or India or any other foreign country? So shouldn't we do something now to make sure that—for the next pandemic as well as this one—we produce them here?

Two, make sure that Federal and State stockpiles have sufficient protective equipment—masks, gowns—ventilators, and other absolutely essential supplies so that we don't run out during this pandemic or the next one. Now, how controversial could that be? Do we really want to run out of masks and protective equipment in the next pandemic or in what remains of this one?

Three, create more authority for the Federal Government to work with private companies to maintain more supplies and manufacturing capacity for products that are needed during a public health emergency.

We have the strongest, best, most creative private sector in the world. Why would we not want our government working with it as much as it possibly could to save our lives during this pandemic and the next pandemic?

The act also does the one thing that all of the experts with whom we have talked say is essential: Make sure there is a steady stream of money for the next 10 years so there is no lapse in preparedness. I would propose that we do this with 10 years of advance appropriations; in other words, that we ap-

propriate this year \$15 billion and spend it over 10 years—that is \$1.5 billion a year—so Congress will be able to continue its oversight and make certain that our manufacturing plants onshore are kept up to date and that State stockpiles in Alaska, Tennessee, and every State and the Federal stockpile are not depleted during tough budget times, which we know will surely come, just as surely as we know the next pandemic will come.

On June 9, I released a white paper on steps I thought Congress should take before the end of the year in order to get ready for the next pandemic. I am not a medical expert. So the main purpose of my white paper, as chair of the Senate's Health Committee, was to elicit recommendations to Congress from the experts that we could consider and act on this year. We asked the experts to get their ideas in by June 26.

I asked for recommendations in five areas:

No. 1, tests, treatments, and vaccines; how do we accelerate research and development?

No. 2, disease surveillance; expand our ability to detect, identify, model, and track emerging infectious diseases.

No. 3, stockpiles, distribution, and surges; rebuild and maintain the Federal and State stockpiles and improve the medical supply surge capacity and distribution; in other words, make sure we have masks and gowns and ventilators so the hospitals are ready if something happens.

No. 4, public health capabilities; improve State and local capacity to respond. Most of our public health is taken care of not here but by our State and local public health departments.

Finally, who is on the flagpole? That is improving coordination of Federal agencies during a public health emergency.

Our committee, the Senate's Health Committee, received 350 responses from leading public health experts around the country. They had many recommendations for short-term and long-term proposals to address future pandemics. As my staff and I reviewed these proposals and other feedback, I asked us to focus on targeted ideas that would generate broad bipartisan consensus and help address some of the most pressing issues that we are facing today.

That led us to three strategic areas: One, sustaining onshore manufacturing—22 responses mentioned that. Two, creating and sustaining the State stockpiles—23 mentioned that. Improving the Federal stockpile—24 mentioned that.

These are recommendations from public health experts and bipartisan leaders who have convened the experts. Some of those from whom we heard included Dr. Frist; Governor Ridge, who is cochair of the Bipartisan Commission on Biodefense; former Senator Joe Lieberman, cochair of that same commission; Dr. Julie Gerberding, former

Director for the Centers for Disease Control and Prevention; Andy Slavitt, who during the Obama administration was the Acting Administrator of the Centers for Medicare and Medicaid Services. They all said basically the same thing when it came to these three priorities.

So I introduced today the Preparing for the Next Pandemic Act in three parts: One, onshore manufacturing, which provides new, sustained funding—\$5 billion over 10 years, half a billion a year—to maintain sufficient onshore manufacturing for tests, treatments, and vaccines so that, when a new virus emerges, we have a facility in this country ready to manufacture these products as quickly as possible.

Two, State stockpiles, which provides new, sustained funding—\$10 billion over 10 years; that is \$1 billion a year—so States can create and maintain their own stockpiles of supplies, like masks and ventilators, with help from the Federal Government.

Now, this would be done with some restrictions because what really happened before was that a lot of the States and some of the hospitals, because they had budget shortages, said: Well, we can deplete our stockpiles and save some money. So they saved some money, but when the next pandemic arrived, we weren't ready, the stockpile wasn't full, and people suffered because of that.

Finally, Federal stockpiles. This legislation improves the Federal Strategic National Stockpile by allowing the Federal Government to work with private companies to maintain additional supplies and manufacturing capacity so we are even better prepared for the next pandemic.

Now, there is more to do to be ready for any future pandemic, but these are three steps that we ought to do right now, this month, as part of whatever COVID-19 phase 4 legislation we can agree upon.

In our Senate Health Committee hearing on June 23, this is what former Senate Majority Leader Dr. Bill Frist had to say about the need for sustained funding to better prepare for the next pandemic:

We do have to keep a revenue stream out there, Dr. Frist said, that is dependable, that is sustainable, that is long-term, and that is flexible. What we are really dealing with is a rare but certain event, said Dr. Frist, and the rarity is hard for Congress to deal with because of the attention span of Congress, and that is where it is important to have timelines that are 10 or 15 years out.

Markets tend to look day to day, said Dr. Frist. Therefore, this means we are going to have to have some sort of public funding that would guarantee a market over that 10-year or 15-year period when that certain event, that certain pandemic, will occur.

Now, there is precedent for what I am proposing today. In 2003, Senator Judd Gregg of New Hampshire—in fact, he

used to stand at this desk and make excited and well informed speeches, and I used to sit right there and listen to him, and he was one of our best U.S. Senators—was chairman of the same Health Committee that I am chairman of today. He then recognized, in 2003, the need for a clear, long-term commitment from the Federal Government to prepare for public health emergencies like COVID-19.

That year, Congress passed what we called Project Bioshield with the leadership of Senator Gregg, Congressman HAL ROGERS, Senator Cochran of Mississippi, and others. The legislation provided \$5 billion in advance appropriations to be used over the next 10 years to buy treatments and vaccines for threats like anthrax and smallpox.

Reflecting on that experience in an editorial earlier this year, Senator Gregg wrote: “In this instance, Congress actually anticipated a serious issue and began addressing it effectively.”

“Congress actually anticipated a serious issue and began addressing it effectively.” Well, why doesn’t Congress do that again? If it worked before, why don’t we do it again? Why don’t we make sure that the next time we have a pandemic, our manufacturing plants aren’t in China or India? We can do that with a very modest amount of money, compared to the trillions of dollars that we are talking about for other things.

At our June 23 hearing, speaking about Federal efforts to build manufacturing capacity to respond to a pandemic flu, Governor Leavitt said: “What I think we did not do adequately as a country, over the course of time, is maintain those manufacturing plants in a way that they were warm and could be stood up quickly.”

In other words, we have had this idea before. We supported building new manufacturing plants, but we lost interest in it—panic, neglect, panic. And they weren’t warm, said Governor Leavitt, when the time came that we needed them.

Regarding stockpiles, Dr. Frist said, we need “not the incremental improvement of stockpiles and means of distribution, but the creation of great and secure stores and networks, with every needed building, laboratory, airplane, truck, and vaccination station, no excuses, no exceptions, everywhere, and for everyone.” That is what Dr. Frist said at our hearing. And he said it 15 years ago.

Former Director of the Centers for Disease Control and Prevention, Dr. Judy Gerberding, said at our hearing:

In the face of an unprecedented public health crisis like the coronavirus, we have seen the Strategic National Stockpile deliver some promising innovations but at the same time discovered areas where there is room for improvement. . . . The COVID-19 pandemic provides us an opportunity to make pragmatic changes; we must act now to avoid becoming complacent and finding ourselves in the same position when the next pandemic occurs.

Panic, neglect, panic.

There is also broad agreement about some additional steps Congress needs to take to prepare for the next pandemic, including disease surveillance, restoring support for our State and local public health systems—Governor Leavitt said they have been seriously underfunded for the last 30 or 40 years—and better coordination of pandemic response.

I don’t propose to deal with those three things today, but I do intend to keep legislation to better prepare for future pandemics on the top of the congressional to-do list until it is done.

In this internet age, attention spans are short. Even with an event as significant as COVID-19, memories fade, and attention moves on quickly to the next crisis. That makes it imperative that Congress act on needed changes this year in order to better prepare for next pandemic, which might be in 20 years or might be next year or next month. The only thing we know for certain is that it will come.

Let us not succumb to the familiar, dangerous habit of panic, neglect, panic. At least Congress can take these three steps to keep vaccine manufacturing on our shores and stockpiles supplied now while the pandemic has our attention, while we have our eye on the ball.

Mr. President, I ask unanimous consent to have printed in the RECORD a copy of the summary of responses the Health Committee received in response to the white paper that I released on June 9.

There being no objection, the material was ordered to be printed in the RECORD, as follows:

SUMMARY OF RESPONSES TO “PREPARING FOR THE NEXT PANDEMIC” WHITE PAPER
(By Senator Lamar Alexander)

On June 9, Chairman Alexander released “Preparing for the Next Pandemic,” a white paper with five recommendations to address future pandemics based on lessons learned from COVID-19 and the past 20 years of public health preparedness. The main purpose of the white paper was to elicit recommendations and feedback from experts who have studied public health preparedness that Congress could consider and act on this year. The Committee received over 350 responses to specific questions posed by the white paper and more broadly on the topic of public health and medical preparedness and response.

1. TESTS, TREATMENTS, AND VACCINES—ACCELERATE RESEARCH AND DEVELOPMENT

Among those responses focused on accelerating research and development of tests, treatments, and vaccines, respondents recommended leveraging public-private partnerships and tapping into strategic computing reserves, expanding the capacities of the Biomedical Advanced Research and Development Authority (BARDA), and sustaining on-shore manufacturing for high-priority countermeasures, like vaccines and treatments, and other aspects of pharmaceutical manufacturing, such as active pharmaceutical ingredients and fill-finish capacity for bulk drug substances. While the federal government currently has robust programs in these areas, commenters recommended that these programs be bolstered further,

better integrated with one another, and improve coordination of priorities across programs, particularly between BARDA and the National Institutes of Health.

2. DISEASE SURVEILLANCE—EXPAND ABILITY TO DETECT, IDENTIFY, MODEL AND TRACK EMERGING INFECTIOUS DISEASES

The need for improved emerging infectious disease surveillance was addressed by several commenters. Many stakeholders suggested improving the public health information systems by modernizing current public health data reporting systems and better integrating such systems. Commenters specifically mentioned the public health data systems modernization provisions included in the Lower Health Care Costs Act as a solution to this problem. In addition, many responses included suggestions for how to improve contact tracing capabilities within states. Some experts mentioned investing in improved disease surveillance and leveraging technology or private-public partnerships in order to better detect, identify, and model emerging infectious diseases.

3. STOCKPILES DISTRIBUTION AND SURGES—REBUILD AND MAINTAIN FEDERAL AND STATE STOCKPILES AND IMPROVE MEDICAL SUPPLY SURGE CAPACITY AND DISTRIBUTION

Many commenters discussed the need for improved stockpiling and distribution of medical supplies. General themes covered by commenters on this subject include improved situational awareness and streamlined distribution of medical supplies and countermeasures, such as testing supplies, personal protective equipment, and an eventual COVID-19 vaccine; better oversight of the contents of stockpiles; and improved coordination between federal, state, and local governments. Some commenters discussed their preference for an enhanced federal role in stockpiling and distributing supplies. However, other commenters agreed that increasing stockpiles at the state and local level and in health care facilities would provide more efficient access to supplies during a public health emergency. Commenters who agreed with the concept of state stockpiles highlighted the need for strong coordination between the federal government and the states on stockpile inventories and deployments so that supplies are used as efficiently as possible. Additionally, some commenters pointed out that certain products, like specialized countermeasures for threats like anthrax and smallpox, would not be appropriate to stockpile at the state level. Rather, they said that state stockpiles should focus on products like personal protective equipment and broad-spectrum antibiotics, which are typically available through commercial distributors and are useful across responses.

4. PUBLIC HEALTH CAPABILITIES—IMPROVE STATE AND LOCAL CAPACITY TO RESPOND

Many experts and stakeholders addressed the importance of improving public health infrastructure, and recommended additional funding to enhance state and local response capabilities. Specifically, some experts suggested bolstering testing infrastructure, and investing in greater state laboratory and biosafety laboratory capacity. They also highlighted the need for an improved public health workforce by implementing additional preparedness training for health care providers and public health workers. Lastly, commenters suggested making permanent several temporary flexibilities provided during the COVID-19 public health emergency that have expanded access to telehealth services, as well as improving interoperability for electronic health records.

5. WHO IS ON FLAGPOLE?—IMPROVE COORDINATION OF FEDERAL AGENCIES DURING A PUBLIC HEALTH EMERGENCY

Many commenters also addressed the lack of consistent coordination between the federal government, states, and the private sector and uncertainty over federal leadership during a pandemic. Generally, commenters agreed that the Office of the Assistant Secretary for Preparedness and Response (ASPR) at the U.S. Department of Health and Human Services is the right entity to coordinate the day-to-day operational response to a public health emergency. However, multiple commenters noted that ASPR does not have sufficient authority to direct the activities of other departments and agencies, which is necessary during a whole-of-government response. Additionally, these commenters noted that White House involvement, both during a response and when there is no public health emergency in effect, is necessary to ensuring coordination among departments and agencies and that public health preparedness remains a top priority, even after COVID-19. Some commenters recommended reestablishing an office within the National Security Council focused on biodefense to institutionalize this responsibility.

6. ADDITIONAL COMMENTS

A theme across all responses was a specific need for increased and sustained funding for public health preparedness programs. Over the past several decades, funding for these programs at the federal, state, and local levels has experienced inconsistencies. In areas where funding has occasionally increased, such as for research, development, and procurement of medical countermeasures, these increases have been relatively modest and often not consistent year to year. This variability in funding has led to uncertainty from the private sector and other levels of government that these capabilities will be there when the country needs to respond to a public health threat. Without sustained and reliable funding for these programs, commenters stated that we will not be prepared for the next pandemic.

SUBMITTED RESOLUTIONS

SENATE RESOLUTION 652—EX-PRESSING THE SENSE OF THE SENATE REGARDING PRE-CONDITIONS FOR THE READMISSION OF THE RUSSIAN FEDERATION INTO A RECONSTITUTED GROUP OF EIGHT OR PARTICIPATION IN THE GROUP OF SEVEN

Mr. DURBIN (for himself, Mr. BROWN, Mr. BLUMENTHAL, Ms. HIRONO, Mr. BOOKER, Mr. VAN HOLLEN, Ms. BALDWIN, Mr. CASEY, Mrs. FEINSTEIN, Mr. MARKEY, Mr. COONS, Mr. WYDEN, and Ms. HARRIS) submitted the following resolution; which was referred to the Committee on Foreign Relations:

S. RES. 652

Whereas, since 2014, the Russian Federation has illegally occupied Crimea and Donbass, which was condemned in the Senate by passage of Senate Resolution 378 by unanimous consent in the 113th Congress;

Whereas, in March 2014, the Group of Eight suspended the Russian Federation as a direct result of its actions in Ukraine and instead continued as the Group of Seven;

Whereas, since 2014, the Russian Federation has also continued malign attacks on western democracies, including ongoing ag-

gressive cyber and military provocations; and

Whereas the Russian Federation has reportedly offered bounties to kill members of the United States Armed Forces deployed in Afghanistan: Now, therefore, be it

Resolved, That it is the sense of the Senate that, as precondition for readmission into a reconstituted Group of Eight or participation in a Group of Seven proceeding, the Russian Federation must—

(1) end its illegal occupation of Crimea and Donbass;

(2) cease its malign activities against the United States and its allies; and

(3) terminate any bounties against members of the United States Armed Forces.

AMENDMENTS SUBMITTED AND PROPOSED

SA 2436. Mr. GRASSLEY submitted an amendment intended to be proposed to amendment SA 2301 proposed by Mr. INHOFE to the bill S. 4049, to authorize appropriations for fiscal year 2021 for military activities of the Department of Defense, for military construction, and for defense activities of the Department of Energy, to prescribe military personnel strengths for such fiscal year, and for other purposes; which was ordered to lie on the table.

SA 2437. Ms. KLOBUCHAR (for herself and Mr. ROUNDS) submitted an amendment intended to be proposed to amendment SA 2301 proposed by Mr. INHOFE to the bill S. 4049, supra; which was ordered to lie on the table.

SA 2438. Mr. KING (for himself and Mr. SASSE) submitted an amendment intended to be proposed by him to the bill S. 4049, supra; which was ordered to lie on the table.

SA 2439. Mr. KING (for himself and Mr. SASSE) submitted an amendment intended to be proposed by him to the bill S. 4049, supra; which was ordered to lie on the table.

SA 2440. Mr. KING (for himself, Mr. ALEXANDER, and Mr. DAINES) submitted an amendment intended to be proposed to amendment SA 2301 proposed by Mr. INHOFE to the bill S. 4049, supra; which was ordered to lie on the table.

SA 2441. Mrs. GILLIBRAND submitted an amendment intended to be proposed to amendment SA 2301 proposed by Mr. INHOFE to the bill S. 4049, supra; which was ordered to lie on the table.

SA 2442. Mr. MENENDEZ submitted an amendment intended to be proposed to amendment SA 2301 proposed by Mr. INHOFE to the bill S. 4049, supra; which was ordered to lie on the table.

SA 2443. Mr. THUNE submitted an amendment intended to be proposed to amendment SA 2301 proposed by Mr. INHOFE to the bill S. 4049, supra; which was ordered to lie on the table.

SA 2444. Mr. SASSE submitted an amendment intended to be proposed to amendment SA 2301 proposed by Mr. INHOFE to the bill S. 4049, supra; which was ordered to lie on the table.

SA 2445. Mr. MORAN submitted an amendment intended to be proposed to amendment SA 2301 proposed by Mr. INHOFE to the bill S. 4049, supra; which was ordered to lie on the table.

SA 2446. Mr. MORAN (for himself, Ms. CANTWELL, and Mr. PETERS) submitted an amendment intended to be proposed to amendment SA 2301 proposed by Mr. INHOFE to the bill S. 4049, supra; which was ordered to lie on the table.

SA 2447. Mr. MORAN (for himself, Ms. CANTWELL, and Mr. PETERS) submitted an amendment intended to be proposed to amendment SA 2301 proposed by Mr. INHOFE to the bill S. 4049, supra; which was ordered to lie on the table.

SA 2448. Mr. ENZI submitted an amendment intended to be proposed to amendment SA 2301 proposed by Mr. INHOFE to the bill S. 4049, supra; which was ordered to lie on the table.

SA 2449. Mr. PERDUE submitted an amendment intended to be proposed to amendment SA 2301 proposed by Mr. INHOFE to the bill S. 4049, supra; which was ordered to lie on the table.

SA 2450. Mr. MORAN submitted an amendment intended to be proposed to amendment SA 2301 proposed by Mr. INHOFE to the bill S. 4049, supra; which was ordered to lie on the table.

SA 2451. Ms. WARREN (for Mr. MARKEY (for himself, Ms. WARREN, and Mr. BROWN)) submitted an amendment intended to be proposed by Ms. WARREN to the bill S. 4049, supra; which was ordered to lie on the table.

SA 2452. Ms. WARREN (for Mr. MARKEY (for himself, Ms. WARREN, Mr. BOOKER, Mr. BLUMENTHAL, Mr. WYDEN, Mr. VAN HOLLEN, Mr. MENENDEZ, Ms. BALDWIN, Mr. WHITEHOUSE, and Ms. HIRONO)) submitted an amendment intended to be proposed to amendment SA 2301 proposed by Mr. INHOFE to the bill S. 4049, supra; which was ordered to lie on the table.

SA 2453. Mr. CASSIDY submitted an amendment intended to be proposed to amendment SA 2301 proposed by Mr. INHOFE to the bill S. 4049, supra; which was ordered to lie on the table.

SA 2454. Ms. McSALLY submitted an amendment intended to be proposed to amendment SA 2301 proposed by Mr. INHOFE to the bill S. 4049, supra; which was ordered to lie on the table.

SA 2455. Ms. CORTEZ MASTO (for herself, Mr. DAINES, Mr. BLUMENTHAL, Mrs. CAPITO, Mr. CRAMER, Ms. HASSAN, Mr. JONES, Mr. KAINE, Mr. PETERS, Ms. ROSEN, Mrs. SHAHEEN, Mr. UDALL, and Mrs. BLACKBURN) submitted an amendment intended to be proposed to amendment SA 2301 proposed by Mr. INHOFE to the bill S. 4049, supra; which was ordered to lie on the table.

SA 2456. Mr. MERKLEY submitted an amendment intended to be proposed to amendment SA 2301 proposed by Mr. INHOFE to the bill S. 4049, supra; which was ordered to lie on the table.

SA 2457. Mr. MERKLEY (for himself, Mr. WYDEN, Mr. MURPHY, Mr. SANDERS, Mr. VAN HOLLEN, Mr. MARKEY, Ms. HARRIS, Mr. BLUMENTHAL, Mr. BOOKER, Mrs. MURRAY, Mr. BROWN, Mr. DURBIN, Ms. CANTWELL, Ms. BALDWIN, Mr. KING, Ms. HIRONO, Mr. HEINRICH, Ms. KLOBUCHAR, Ms. WARREN, Ms. DUCKWORTH, and Mr. BENNET) submitted an amendment intended to be proposed to amendment SA 2301 proposed by Mr. INHOFE to the bill S. 4049, supra; which was ordered to lie on the table.

SA 2458. Ms. McSALLY submitted an amendment intended to be proposed to amendment SA 2301 proposed by Mr. INHOFE to the bill S. 4049, supra; which was ordered to lie on the table.

SA 2459. Mr. PERDUE submitted an amendment intended to be proposed to amendment SA 2301 proposed by Mr. INHOFE to the bill S. 4049, supra; which was ordered to lie on the table.

SA 2460. Mr. PERDUE submitted an amendment intended to be proposed to amendment SA 2301 proposed by Mr. INHOFE to the bill S. 4049, supra; which was ordered to lie on the table.

SA 2461. Mr. REED submitted an amendment intended to be proposed to amendment SA 2301 proposed by Mr. INHOFE to the bill S. 4049, supra; which was ordered to lie on the table.

SA 2462. Mr. VAN HOLLEN (for himself and Mr. BLUNT) submitted an amendment intended to be proposed by him to the bill S.