transfer the catafalque to the Supreme Court for a funeral service.

The message further announced that the House has passed the following bill, in which it requests the concurrence of the Senate:

H.R. 1565. An act to amend title 38, United States Code, to extend through December 31, 1997, the period during which the Secretary of Veterans Affairs is authorized to provide priority health care to certain veterans exposed to agent orange, ionizing radiation, or environmental hazards.

The message also announced that pursuant to the provisions of section 9355(a) of title 10, United States Code, the Speaker announces the appointment as members of the Board of Visitors to the U.S. Air Force Academy the following Members on the part of the House: Mr. YOUNG of Florida, Mr. HEFLEY, Mr. DICKS, and Mr. TANNER.

MEASURES REFERRED

The following bill was read the first and second times by unanimous consent and referred as indicated:

H.R. 1565. An act to amend title 38, United States Code, to extend through December 31, 1997, the period during which the Secretary of Veterans Affairs is authorized to provide priority health care to certain veterans exposed to agent orange, ionizing radiation, or environmental hazards; to the Committee on Veterans' Affairs.

REPORTS OF COMMITTEE

The following report of committee was submitted:

By Mr. STEVENS, from the Committee on Rules and Administration:

Special Report entitled ''Review of Legislative Activity During the 103D Congress'' (Rept. No. 104–100).

EXECUTIVE REPORTS OF COMMITTEES

The following executive reports of committees were submitted:

By Mr. D'AMATO, from the Committee on Banking, Housing, and Urban Affairs:

Deborah Dudley Branson, of Texas, to be a Director of the Securities Investor Protection Corporation for a term expiring December 31, 1996.

Charles L. Marinaccio, of the District of Columbia, to be a Director of the Securities Investor Protection Corporation for a term expiring December 31, 1996.

Steve M. Hays, of Tennessee, to be a Member of the Board of Directors of the National Institute of Building Sciences for a term expiring September 7, 1997.

Martin Neil Baily, of Maryland, to be a Member of the Council of Economic Advisers.

Tony Scallon, of Minnesota, to be a Member of the Board of Directors of the National Consumer Cooperative Bank for a term of three years.

Sheila Anne Smith, of Illinois, to be a Member of the Board of Directors of the National Consumer Cooperative Bank for a term of three years.

Marianne C. Spraggins, of New York, to be a Director of the Securities Investor Protection Corporation for a term expiring December 31, 1997.

Albert James Dwoskin, of Virginia, to be a Director of the Securities Investor Protection Corporation for a term expiring December 31, 1998.

(The above nominations were reported with the recommendation that they be confirmed, subject to the nominees' commitment to respond to requests to appear and testify before any duly constituted committee of the Senate.)

By Mr. PACKWOOD, from the Committee on Finance:

Ira S. Shapiro, of Maryland, for the rank of Ambassador during his tenure of service as Senior Counsel and Negotiator in the Office of the United States Trade Representative:

(The above nomination was reported with the recommendation that he be confirmed, subject to the nominee's commitment to respond to requests to appear and testify before any duly constituted committee of the Senate.)

INTRODUCTION OF BILLS AND JOINT RESOLUTIONS

The following bills and joint resolutions were introduced, read the first and second time by unanimous consent, and referred as indicated:

By Mr. CHAFEE:

S. 975. A bill to authorize the Secretary of Transportation to issue a certificate of documentation with appropriate endorsement for employment in the coastwise trade for the vessel JAJO, and for other purposes; to the Committee on Commerce, Science, and Transportation.

By Mr. NICKLES:

S. 976. A bill to transfer management of the Tishomingo National Wildlife Refuge in Oklahoma to the State of Oklahoma, and for other purposes; to the Committee on Environment and Public Works.

By Mr. HATCH:

S. 977. A bill to correct certain references in the Bankruptcy Code; to the Committee on the Judiciary.

By Mrs. HUTCHISON (for herself and Mr. DODD):

S. 978. A bill to facilitate contributions to charitable organizations by codifying certain exemptions from the Federal securities laws, to clarify the inapplicability of antitrust laws to charitable gift annuities, and for other purposes; to the Committee on Banking, Housing, and Urban Affairs.

By Mrs. BOXER (for herself, Mr. KENNEDY, Ms. MIKULSKI, Mrs. MURRAY, Mrs. FEINSTEIN, Ms. SNOWE, Mr. LAUTENBERG, Mr. INOUYE, Mr. GLENN, Mr. PACKWOOD, Mr. DODD, and Mr. SPECTER):

S. 979. A bill to protect women's reproductive health and constitutional right to choice, and for other purposes; to the Committee on Labor and Human Resources.

By Mr. HARKIN:

S. 980. A bill to amend the Public Health Service Act and the Social Security Act to protect and improve the availability, quality and affordability of health care in rural areas, and for other purposes; to the Committee on Finance.

By Mr. EXON:

S. 981. A bill entitled ''Truck Safety and Congressional Partnership Act''; to the Committee on Commerce, Science, and Transportation.

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mr. NICKLES:

S. 976. A bill to transfer management of the Tishomingo National Wildlife Refuge in Oklahoma to the State of Oklahoma, and for other purposes; to the Committee on Environment and Public Works.

THE TISHOMINGO NATIONAL WILDLIFE REFUGE ACT

Mr. NICKLES. Mr. President, I take the floor today to introduce a bill which will turn the management responsibilities of the Tishomingo National Wildlife Refuge from the U.S. Fish and Wildlife Service over to the Oklahoma Department of Wildlife Conservation. This legislation responds to unacceptable policies promulgated by the Fish and Wildlife Service in their management of national wildlife refuges.

During the past several years, the Fish and Wildlife Service has attempted to restrict public access and traditional activities on our wildlife refuge preserves. Long-allowed public uses on refuges such as wildlife viewing, hunting, fishing, hiking, grazing, and boating, have come under close scrutiny and curtailment. These short-sighted restrictions proposed by the administration's political appointees have resulted in unnecessary burdens and pressures on the public who use and benefit from our wildlife refuges.

What the Fish and Wildlife Service fails to realize is that the taxpayers own and finance the refuge lands. Outdoor recreation contributes significantly to local economies and local support for the refuges. Allowing traditional activities, such as fishing and boating at Tishomingo, is integral in maintaining continued public support and funding for the refuge system.

Due to ill-advised changes in Federal management practices during the last 10 years, wildlife populations on the Tishomingo refuge have severely declined. The State of Oklahoma, however, presently provides suitable habitats for wildlife resources across the State and currently manages 650,000 acres of Federal land. State officials have assured me that they will improve habitat conditions for wildlife at the refuge and work to reverse the negative impact of inadequate Federal management.

My legislation will ensure limited Federal funding for the Tishomingo Refuge and will ultimately result in significant savings to the Federal Government. The Oklahoma Department of Wildlife Conservation can manage the refuge more efficiently and with fewer taxpayer dollars. Specifically, my bill stipulates annual funding be made available to the State in the amount of 50 percent of the refuge's current operating costs.

In conclusion, I believe the State of Oklahoma can manage the Tishomingo National Wildlife Refuge in an efficient and cost-effective manner and do so with fewer employees than the Federal Government. Local management will result in better communication between the managers of the refuge and

the public. Those responsible for managing our national refuges must be held accountable to the needs of the public they serve.

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

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

S. 976

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

SECTION 1. TRANSFER OF MANAGEMENT OF TISHOMINGO NATIONAL WILDLIFE REFUGE.

(a) TRANSFER.—Not later than 30 days after the date of enactment of this Act, the Secretary of the Interior shall transfer, with the consent of the Governor of Oklahoma, the management of the lands and waters within the Tishomingo National Wildlife Refuge in Oklahoma to the State of Oklahoma for administration by the Director of the Oklahoma Department of Wildlife Conservation (or any successor agency).

(b) MANAGEMENT.—

(1) IN GENERAL.—The lands and waters transferred under subsection (a) shall—

(A) be managed for the same uses and in the same manner as the lands were managed by the United States Fish and Wildlife Service prior to 1994; and

(B) continue to be a national wildlife refuge.

(2) APPLICABLE LAWS.—The laws (including regulations) applicable to the National Wildlife Refuge System established under the National Wildlife Refuge System Administration Act of 1966 (16 U.S.C. 668dd *et seq.*) shall continue to be applicable to the lands and waters on and after the effective date of the transfer under subsection (a).

(c) AUTHORIZATION OF FUNDING.—For each fiscal year commencing after the date of enactment of this Act, there is authorized to be appropriated to the Secretary of the Interior to make annual grants to the State of Oklahoma for management of the lands and waters transferred under subsection (a) an amount equal to 50 percent of the amount made available to the Secretary of the Interior in fiscal year 1994 for the management of the refuge.

By Mr. HATCH:

S. 977. A bill to correct certain references in the Bankruptcy Code; to the Committee on the Judiciary.

TECHNICAL CORRECTION LEGISLATION

● Mr. HATCH. Mr. President, I am pleased to introduce legislation that would work a purely technical correction to certain references in the Bankruptcy Code.

Title 11, United States Code, section 1228 contains incorrect cross references to 11 U.S.C. §1222(b)(10). Those references should be to 11 U.S.C. §1222(b)(9). The errors have been pointed out to me by practitioners, and have been commented on by the leading bankruptcy treatise. See 5 ''Collier on Bankruptcy'' ¶1288.01 at p. 1228–3 n.1 (15th ed. 1994). The bill I introduce today would correct those errors.

The substance behind the corrections is fairly straightforward. Section 1228 provides for the discharge of debt in chapter 12 bankruptcies. Under that provision, as soon as the debtor completes all payments under the debtor's pan, debt will generally be discharged, subject to a few, limited exceptions. One obvious exception covers certain payments that, under the plan, will necessarily extend beyond the period of the plan. It simply makes sense that, where the plan contemplates payments to be made beyond the period of the plan, the debt will not be discharged at the close of the plan period.

The exception currently refers to subsections 1222(b)(5) and 1222(b)(10), which appear in that section of chapter 12 governing the contents of the plan. The reference to subsection 1222(b)(10) is plainly in error, however, and should be to subsection 1222(b)(9). Subsections 1222(b)(5) and 1222(b)(9) both concern debts on which payments are due following completion of the plan. Subsection 1222(b)(10), however, concerns something entirely different: the vesting of property in the debtor or another entity. The current cites to subsection 1222(b)(10) should be to 1222(b)(9). This bill corrects those errors, in accordance with the suggestions of practitioners and commentators.

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

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

S. 977

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

SECTION 1. REFERENCE.

Section 1228 of title 11, United States Code, is amended by striking ''section 1222(b)(10)'' each place it appears and inserting ''section 1222(b)(9)''.●

By Mrs. HUTCHISON (for herself and Mr. DODD):

S. 978. A bill to facilitate contributions to charitable organizations by codifying certain exemptions from the Federal securities laws, to clarify the inapplicability of antitrust laws to charitable gift annuities, and for other purposes; to the Committee on Banking, Housing, and Urban Affairs.

THE CHARITABLE GIVING PROTECTION ACT OF 1995

● Mrs. HUTCHISON. Mr. President, one of charities' most important sources of funds—charitable gift annuities—is threatened.

Ever since the American Bible Society entered into the first planned giving arrangement in the 1830's, charitable gift annuities have been a traditional method of giving in America. Typically, the donor gives property to a charity and receives some of the investment income for the rest of her life. After the donor's death, the charity keeps the property to help with its charitable mission.

Donors establish charitable gift annuities to help feed and clothe the neediest among us, to provide relief for disaster victims, to heal the sick, to educate our children, and to bring culture to our communities.

The threat to charities comes from the misapplication of laws to protect consumers from securities fraud and unfair competition to charitable giving. A lawsuit filed in Federal court in Wichita Falls, TX, challenges the ability of charities under Federal securities laws and antitrust laws to engage in planned giving with donors.

The lawsuit alleges that the American Council on Gift Annuities—an educational organization sponsored by more than 1,500 charities to assist them in issuing gift annuities—violated antitrust law by providing actuarial tables to charities to assist them in determining the interest they should pay on annuities. The lawsuit also alleges that commingling of more than one charities' trust funds in a pooled income fund is a violation of the Investment Company Act of 1940, and other securities laws.

The plaintiff—a disappointed potential heir of the elderly woman who made the charitable donation—says that it is price-fixing for the council to suggest what charities should pay in interest on gift annuities. She overlooks that gift annuities aren't trade or commerce in the first place. Congress recognized this fact in the Technical Corrections Act of 1988 when it excepted gift annuities from the definition of commercial insurance.

Instead of getting the best possible return on her investment, a charitable donor is trying to help the charity. If she wanted investment return, she would go to a bank or a brokerage house, not the Red Cross.

Lawyers for the plaintiff are seeking class action certification to expand the suit to charities from every State. The lawyers ask for the return of all charitable annuity donations plus treble damages—damages that would have to be paid from endowments or unrelated donations.

Such an award could financially disable thousand of charities, including hospitals, relief organizations, arts groups, museums, universities, and every religious denomination in the country. One of the plaintiff's lawyers in this case has boasted that this is a ''billion-dollar lawsuit,'' because it will extract huge sums of money from our Nation's noblest institutions—and earn him a big contingency fee.

Today I am introducing legislation to prevent the financial security of American charities from being undermined. The bill exempts charitable organization's annuity activities from the antitrust laws. It also codifies current SEC policy for irrevocable trusts by clarifying that charities may make collective investments under the securities laws, such as investment in pooled income funds. For revocable trusts, the bill provides a 3-year window for compliance with the securities laws, termination of revocable trusts, or conversion of revocable trusts into irrevocable trusts.

Similar legislation was unanimously passed this spring by the Texas Legislature to clarify that charities issuing gift annuities are not required to be licensed as insurance companies or incorporated as trust companies.

Charities in America have a consistent track record of honoring their promises and commitments to donors, and will remain liable for fraudulent acts—although none are alleged in this lawsuit. My bill does not exempt charities from liability for fraud. The persons responsible for the Foundation for New Era Philanthropy ''Ponzi Scheme'' would still be held responsible for their acts.

Charities are not harming anyone—the only harm being done is by this lawsuit to America's charities. We must act now to protect charitable giving from harm, and to protect our laws from being misapplied.

Returning charitable annuity gifts and opening up endowments to pay treble damages will harm all of us. Every dollar lost is a child unvaccinated, a baby unfed, a sick person with no medical care, a Boy Scout troop that will cease to exist, a house for a poor family that will not be built, and a scholarship that will not be granted. I urge all Senators to protect their most important institutions and pass this bill as soon as possible.●

By Mrs. BOXER (for herself, Mr. KENNEDY, Ms. MIKULSKI, Mrs. MURRAY, Mrs. FEINSTEIN, Ms. SNOWE, Mr. LAUTENBERG, Mr. INOUYE, Mr. GLENN, Mr. PACKWOOD, Mr. DODD, and Mr. SPECTER):

S. 979. A bill to protect women's reproductive health and constitutional right to choice, and for other purposes; to the Committee on Labor and Human Resources.

THE WOMEN'S CHOICE AND REPRODUCTIVE HEALTH PROTECTION ACT

● Mrs. BOXER. Mr. President, I introduce the Women's Choice and Reproductive Health Protection Act with my colleagues, Senator KENNEDY, Senator MIKULSKI, Senator MURRAY, Senator FEINSTEIN, Senator SNOWE, Senator LAUTENBERG, Senator INOUYE, Senator GLENN, Senator PACKWOOD, Senator DODD, and Senator SPECTER. Similar legislation will be introduced in the House by Representatives SCHROEDER and LOWEY.

The Women's Choice and Reproductive Health Protection Act unequivocally calls on Congress to maintain current policies which preserve a woman's right to choose and critical reproductive health care services.

Specifically, the bill upholds the following policies which represent gains for women that were achieved through legislative action, Presidential Executive order or court decisions:

Medicaid funding of abortions for victims of rape or incest;

Protection for reproductive health care clinics and a woman's access to them;

Reauthorization of family planning programs;

Funding for contraceptive research and for screening programs in all 50 States for breast cancer, cervical cancer, and chlamydia;

The prohibition of any ''gag rule'' on information pertaining to reproductive medical services;

Fair evaluation of the drug RU–486;

Ensuring that all women, including Federal employees, can obtain insurance policies that provide the full range of reproductive health care services;

Allowing women in the military to use their own funds to obtain abortion services at overseas facilities; and

A woman's right to choose, as decided by the Supreme Court in Roe versus Wade.

The American people overwhelmingly support a woman's right to choose. Yet there are those in this Congress who are determined to turn the clock back—on clinic access, on family planning, and on reproductive rights. The women of America cannot afford to go back and this bill calls on Congress to hold firm against such attacks.

I urge my colleagues to join me in cosponsoring this bill and in reaffirming their support for a woman's right to choose and for crucial reproductive health care services.●

By Mr. HARKIN:

S. 980. A bill to amend the Public Health Service Act and the Social Security Act to protect and improve the availability, quality and affordability of health care in rural areas, and for other purposes; to the Committee on Finance.

THE RURAL HEALTH CARE PROTECTION AND IMPROVEMENT ACT OF 1995

● Mr. HARKIN. Mr. President, today I introduce the Rural Health Care Protection and Improvement Act of 1995. I have introduced similar legislation in previous sessions of Congress but believe the need for the legislation has grown more critical in light of our failure to enact comprehensive health care reform and because of the impending cuts in Medicare and Medicaid.

Perhaps no where else will the proposed Medicare and Medicaid cuts hit harder than in Iowa and other rural States where there is such a high proportion of seniors, uninsured and others without access to health care. Iowa ranks first in percent of citizens over age 85 and third nationally in percent of the population over age 65. The health care system in many small towns in Iowa is already on the critical list—we have too few doctors, nurses, and other health care professionals and many of our rural hospitals are barely making it.

Because of demographics our health care providers in Iowa depend heavily on Medicare payments. Many Iowa hospitals are financially strained and 75 percent of all hospitals lost money on patient revenue in 1993. But, according to a recent study conducted by Lewin-VHI, under the Republican budget plan, Iowa hospitals will lose on average $1,276 for each Medicare care patient in the year 2000—and losses for rural hospitals will be even greater.

Mr. President, without question, the future of rural health care is jeopardized by the budget plan we will consider later this week and the reconciliation bill that will implement it. The level of cuts proposed would be absolutely devastating to the fragile health care systems in rural areas and thus to our rural and small town economies as hospitals are typically the largest employer in small towns and help keep other businesses there. So our first and most important concern must be to stop the level of cuts proposed by the budget resolution. If they become law, there is very little that could be done to resuscitate rural health care. Smaller efforts, while well intentioned, will not be successful in counteracting the impacts of such cuts.

We need to be improving access to and affordability of quality health care in rural areas, not reducing it. The legislation I introduce today would do just that. It would make a number of important improvements to rural health. First, it would establish a grant program to expand access to health services in rural areas through the use of telemedicine. For 6 years as chairman of the Appropriations Subcommittee on Labor, Health and Human Services, and Education my committee funded many telemedicine projects including several in my own State of Iowa. These funds have spurred great interest and activity in telemedicine across the country. But more needs to be done.

The grant program in my legislation will encourage the development of telemedicine networks which can play a critical role in ensuring that people in rural areas have access to high quality health care. Telemedicine puts technology to work to improve the delivery of health care. It uses technology to link patients and their doctors in rural or remote hospitals with highly-trained medical specialists and state of the art medical technology located hundreds, or even thousands of miles away. These linkages will allow more patients to receive care in their community and will ease the burden on specialists in underserved areas. By increasing the education and training opportunities for providers in rural areas these links will also help underserved communities recruit and retain physicians.

Telemedicine will help ensure that people who live in small towns and rural communities have the same access to quality health care as people in Beverly Hills or Palm Beach.

Rural hospitals and other facilities can benefit from the cost savings and access to specialists that telemedicine provides. Using a network, a family doctor in Muscatine, IA could immediately consult with a specialist at the

University of Iowa for an instant diagnosis in a life-or-death situation. A specialist in Mercy Hospital in Des Moines could provide emergency advice and help oversee a difficult surgery taking place in Centerville. And a radiologist at Methodist Hospital in Des Moines could help examine x rays just taken in Jefferson.

My home State of Iowa has developed a world class fiber optic system that holds great potential in the area of telemedicine. Fiber optic cables greatly enhance the potential of telemedicine because they carry much more information than traditional, copper telephone wires.

My President, telemedicine will allow patients to stay close to home for support. For most people, one of the most traumatic times in their life is when they are sick or injured. And we should be helping them stay with their family and friends, who often provide the support and love they need to get well. This will also reduced costs associated with travel.

One of the obstacles for further expansion of telemedicine is the lack of a payment system in Medicare and Medicaid. To begin to address this problem, my legislation would require the Department of Health and Human Services to issue regulations regarding reimbursement for telemedicine.

This legislation would also authorize the Rural Health Outreach Grant Program. I began this program as chairman of the Health Appropriations Subcommittee several years ago and it has been a great success. Many rural communities suffer critical shortages of health providers. Distance, lack of public transportation, rough terrain, and unpredictable weather, present additional obstacles. This initiative recognizes that existing health and social services agencies do not always cooperate and coordinate to reach needy populations in rural America.

Through the Rural Health Outreach Program rural organizations have been able to come together to collaborate and build networks to deliver much needed health care. For example, communities used funds provided by the Outreach Program to provide basic health care services to isolated seniors, to provide care to pregnant women, to build emergency medical systems, and to bring mental health services to isolated communities with the help of telemedicine.

In my own State of Iowa, outreach funds were used to help get a new hospice program in rural Grundy County up and running. The local hospital joined with the local health department and volunteer organizations to develop a program to help families coping with terminal illness. The program helps families that are struggling to survive under the weight of nursing chores, daily responsibilities and grief.

Mr. President, the Rural Health Care Protection and Improvement Act would also extend the Medicare Department, Small, Rural Hospital Program. Between 1980 and 1990, 330 rural hospitals were forced to close their doors, in large part because of inequities in Medicare reimbursement. In OBRA 1989, Congress wisely acted to redress these inequities by establishing the Medicare Dependent Small Rural Hospital [MDH] Program. The MDH Program allows rural hospitals under 100 beds to qualify for somewhat higher reimbursement if over 60 percent of their patient days went to caring for Medicare patients. But, Mr. President this program expired in October 1994.

Iowa has 45 Medicare department, small, rural, hospitals. These hospitals mean access to health care services and retention of local health care providers. They also provide economic stability and are a strong draw for businesses and residents into the area. If the hospital or clinic closes it means that the local economy goes, and the nursing home goes, and so does the local economy. It is a domino effect.

The MDH Program is helping many Iowa hospitals survive and this program should be extended to ensure that these small rural hospitals continue to provide health care services.

So, Mr. President, the Rural Health Care Protection and Improvement Act will help improve access and enhance the quality of health care in rural areas. It will help shore up the fragile health care infrastructure in our rural communities and towns. I am pleased that Senator KASSEBAUM has included the Rural Outreach Grant Program and a Telemedicine Grant Program in her Health Centers Consolidation Act of 1995 that will soon be voted on in the Labor and Human Resources Committee. And, I am hopeful that as we consider steps to improve our Nation's health care system, the Medicare Department, Small, Rural Hospital Program will be extended. But not even my bill will be enough to save rural health care if the unprecedented level of cuts to Medicare being proposed become a reality. We must defeat those proposals and work toward a more sound, a more reasonable effort to reform Medicare.●

By Mr. EXON:

S. 981. A bill entitled ''Truck Safety and Congressional Partnership Act''; to the Committee on Commerce, Science, and Transportation.

THE TRUCK SAFETY AND CONGRESSIONAL INVOLVEMENT ACT

● Mr. EXON. Mr. President, I introduce legislation which the Senate was expected to consider as an amendment to the National Highway System. Last minute negotiations between the chairman of the Commerce Committee and myself produced an understanding that this legislation would be considered by the full committee at the next scheduled markup.

This legislation is a very simple and very narrow measure. It preserves congressional involvement in critical truck safety issues currently before a trinational committee authorized under the North American Free-Trade Agreement. This legislation simply states that if the executive branch moves to set a standard for single trailer lengths pursuant to the NAFTA negotiations and that standards exceeds 53 feet, the executive branch must come to the Congress for such authority.

This legislation only applies to Federal regulations on truck trailer length issue pursuant to the North American Free-Trade Agreement.

Last year, I chaired a hearing on this issue of truck lengths and safety. Needless to say there are serious concerns about the safety of longer and heavier trucks.

Pursuant to the NAFTA agreement, the Governments of Mexico, Canada, and the United States of America are negotiating the harmonization of traffic safety laws. The Senate has been very concerned about these negotiations and following the approval of NAFTA, approved a resolution expressing the sense of the Senate that these negotiations should bring Canadian and Mexican traffic safety up to United States levels, rather than lower United States standards. I am pleased to report that the Clinton administration expressed their desire to involve Congress in the adoption of any new safety rules arising out of these negotiations. this legislation simply locks in that commitment.

Since the Federal Government maintains no single trailer length standards, there is a risk that a future administration cold use the NAFTA negotiations to increase lengths beyond the generally accepted 53-foot standard.

This legislation assures that the Congress will remain involved in critical truck safety issues. Again, Mr. President, this bill only applies if the administration sets a single trailer length standards pursuant to NAFTA negotiations exceeding 53 feet. In such a case, congressional action would be necessary to implement the longer Federal standard.

The amendment does not restrict State action.

The amendment does not affect Federal legislative action.

The amendment does not affect Federal regulatory action not related to the North American Free-Trade Agreement.

The amendment is consistent with the intent of the Reigle-Exon NAFTA/truck safety resolution, approved by the Senate following the approval of NAFTA, and in no way disrupts the long combination vehicles freeze Senator LAUTENBERG and I authored as part of the 1990 highway bill.

I ask my colleagues to consider and support this narrow legislation which will preserve congressional discretion over truck safety and the NAFTA.●

ADDITIONAL COSPONSORS

S. 12

At the request of Mr. BREAUX, the names of the Senator from Vermont