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House of Representatives

The House met at 12:30 p.m. and was called to order by the Speaker pro tempore (Ms. HIRONO).

DESIGNATION OF SPEAKER PRO TEMPORE

The SPEAKER pro tempore laid before the House the following communication from the Speaker:

WASHINGTON, DC,
October 15, 2007.

I hereby appoint the Honorable MAZIE K. HIRONO to act as Speaker pro tempore on this day.

NANCY PELOSI,
Speaker of the House of Representatives.

MORNING-HOUR DEBATE

The SPEAKER pro tempore. Pursuant to the order of the House of January 4, 2007, the Chair will now recognize Members from lists submitted by the majority and minority leaders for morning-hour debate.

The Chair will alternate recognition between the parties, with each party limited to 30 minutes and each Member, other than the majority and minority leaders and the minority whip, limited to 5 minutes.

RECESS

The SPEAKER pro tempore. Pursuant to clause 12(a) of rule I, the Chair declares the House in recess until 2 p.m. today.

Accordingly (at 12 o'clock and 32 minutes p.m.), the House stood in recess until 2 p.m.

□ 1400

AFTER RECESS

The recess having expired, the House was called to order by the Speaker pro tempore (Mrs. CAPP) at 2 p.m.

PRAYER

The Chaplain, the Reverend Daniel P. Coughlin, offered the following prayer:

Eternal and Almighty God, before You all events of life and calendar pages flip over quickly. The human search for stability in an ever-changing world and the traffic of today's crossroads drives each of us to find new depth within ourselves as we join the motion of another week.

The story of a tsunami comes to mind. Easily we view the destructive consequences on the surface of things around us and question their eruptive origins.

Lord, show us how to detect the beginnings of violence, war, hatred, disruption, and fear. As a leader in the community of peoples, Congress needs to raise the deepest questions.

Enable Members and the people they represent to assess the true cost of the country's lifestyle and the ramifications of our silence on the most important issues.

If it is truly "in God we trust," then all else is called into question and cannot be the measurement of progress or the final goal. Amen.

THE JOURNAL

The SPEAKER pro tempore. The Chair has examined the Journal of the last day's proceedings and announces to the House her approval thereof.

Pursuant to clause 1, rule I, the Journal stands approved.

PLEDGE OF ALLEGIANCE

The SPEAKER pro tempore. Will the gentleman from Florida (Mr. HASTINGS) come forward and lead the House in the Pledge of Allegiance.

Mr. HASTINGS of Florida led the Pledge of Allegiance as follows:

I pledge allegiance to the Flag of the United States of America, and to the Repub-

lic for which it stands, one nation under God, indivisible, with liberty and justice for all.

SCHIP

(Mr. KAGEN asked and was given permission to address the House for 1 minute.)

Mr. KAGEN. Madam Speaker, what kind of Nation are we when 47 million Americans go to bed every night without adequate health care coverage? And what kind of Nation will we become when we turn our backs on those who need us the most, our Nation's children, on whose future we all depend?

The SCHIP bill, the State Children's Health Insurance Program, will provide access to necessary medical services to 11 million of our children who are most in need. We cannot, we shall not, we must not turn our backs on our Nation's children.

I urge my colleagues who have yet to consider voting up or down on this measure to think this thing all the way through. Whose side are you on? Are you on the side of our children, who need you the most? Or are you on the side of special interests? We Democrats are on the side of children. Please reconsider what kind of Nation we will be when we turn our backs on our children.

DEFICIT CONTINUES TO DECLINE

(Mr. WILSON of South Carolina asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. WILSON of South Carolina. Madam Speaker, the Department of Treasury and Office of Management and Budget have announced that today's budget deficit is \$85 billion less than last year. That marks a \$250 billion decline over the last 3 years and brings us even closer to balancing the budget.

□ This symbol represents the time of day during the House proceedings, e.g., □ 1407 is 2:07 p.m.

Matter set in this typeface indicates words inserted or appended, rather than spoken, by a Member of the House on the floor.



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This good news is a clear sign that a government which taxes less and spends less taxpayer dollars and spends them wisely can balance its checkbook. These recent record tax revenues are paying down the deficit, but we must do our part by honoring the hard work of the American people and not passing future bloated budgets and tax hikes.

The American people have learned to live within their means; it is time that Washington do the same. That means we do not spend \$22 billion more than we need to or tax Americans \$400 billion more than they deserve. Above all, the government must address the pending entitlement crisis. This is a situation where Congress cannot pass the buck.

In conclusion, God bless our troops, and we will never forget September the 11th.

HONORING OHIO ATTORNEY GENERAL MARK DANN, U.S. ATTORNEY GREGORY LOCKHART, AND USDA AGENT MARK BARNHART

(Ms. SUTTON asked and was given permission to address the House for 1 minute.)

Ms. SUTTON. Madam Speaker, on October 13, Ohio Attorney General Mark Dann, U.S. Attorney Gregory Lockhart, and USDA Agent Mark Barnhart received the 2007 Humane Law Enforcement Award from the Humane Society and the National District Attorneys Association. They were honored with this prestigious award for conducting one of the largest, best coordinated crackdowns on dog fighting in the Nation.

I am extremely proud that my home State of Ohio is taking a lead in cracking down on this vicious blood sport, but this raid also demonstrates the difficulty authorities have of prosecuting offenders under Federal law.

I have introduced the Dog Fighting Prohibition Act, which would strengthen Federal penalties for those participating in dog fighting and broaden the scope of the law to allow prosecution of everyone involved, from spectators to trainers to dealers. We need to do all we can to end what has become a lucrative gambling business; and to accomplish that, we must give our law enforcement officials like Mark Dann, Gregory Lockhart, and Mark Barnhart the tools that they need. I want to thank them and congratulate them on their efforts, and encourage support for the Dog Fighting Prohibition Act.

FISCAL RESPONSIBILITY

(Ms. FOXX asked and was given permission to address the House for 1 minute.)

Ms. FOXX. Madam Speaker, fiscal responsibility is the cornerstone of a strong economic plan, and House Republicans are dedicated to ensuring that American taxpayers are getting the best product for their money. Un-

fortunately, I can't say my Democrat colleagues feel the same way.

We are 3 weeks into fiscal year 2008, and for the first time in a long time Congress has not sent the President a single appropriations bill. One of these bills funds our veterans, and they deserve the benefits they were promised; yet politics has taken over the Democrat leadership, and their failure is costing veterans over \$4 billion in new benefits.

The Democrat majority also has failed to deliver on promised earmark transparency that would shed light on every earmark, and we're continuing to see abuses within the system.

At almost every opportunity, the Democrat leadership has increased spending and increased taxes to pay for these spending binges. It's time to get back on track to finding commonsense solutions and stop using taxpayer dollars like it's an unlimited source of money.

COMMUNICATION FROM STAFF MEMBER OF COMMITTEE ON APPROPRIATIONS

The SPEAKER pro tempore laid before the House the following communication from Greg Lankler, Staff Assistant, Committee on Appropriations:

OCTOBER 12, 2007.

HON. NANCY PELOSI,
Speaker, House of Representatives,
Washington, DC.

DEAR MADAM SPEAKER: This is to formally notify you pursuant to rule VIII of the Rules of the House of Representatives that I have been served with a grand jury subpoena for testimony and documents issued by the U.S. District Court for the Central District of California.

After consulting with the Office of General Counsel, I will make the determinations required by rule VIII.

Sincerely,

GREG LANKLER,
Staff Assistant.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, the Chair will postpone further proceedings today on motions to suspend the rules on which a recorded vote or the yeas and nays are ordered, or on which the vote is objected to under clause 6 of rule XX.

Record votes on postponed questions will be taken after 6:30 p.m. today.

CONGRATULATING THE STATE OF ISRAEL ON CHAIRING A UNITED NATIONS COMMITTEE FOR THE FIRST TIME IN HISTORY

Mr. ACKERMAN. Madam Speaker, I move to suspend the rules and agree to the resolution (H. Res. 624) congratulating the State of Israel on chairing a United Nations committee for the first time in history, as amended.

The Clerk read the title of the resolution.

The text of the resolution is as follows:

H. RES. 624

Whereas Israel joined the United Nations in 1949, as the 59th member of that organization;

Whereas the preamble of the Charter of the United Nations stated that its objective was to "to save succeeding generations from the scourge of war . . . and to reaffirm faith in fundamental human rights, in the dignity and worth of the human person, in the equal rights of men and women and of nations large and small . . .";

Whereas the United Nations has failed to live up to its goal to promote equal rights among states, as enshrined in its charter, in the case of Israel;

Whereas the democratic State of Israel is denied full representation within the United Nations, and its constituent agencies and bodies, yet repressive regimes in violation of United Nations human rights principles are afforded full rights and privileges;

Whereas in May 2000, Israel accepted an invitation to become a temporary member of the United Nations' Western European and Others Group (WEOG), and in May 2004, Israel was granted an indefinite extension of its qualified membership in WEOG;

Whereas since Israel was accepted as part of WEOG in 2000, it has had the right to apply for positions on United Nations committees;

Whereas the State of Israel is the only member of WEOG in a conditional status;

Whereas Israel is excluded from discussions and consultations of WEOG at the United Nations offices in Geneva, Nairobi, Rome, and Vienna;

Whereas Israel has been refused admission to the Asian States Group of the United Nations, thereby being denied the rights and privileges of full membership in the United Nations;

Whereas Israel has submitted its candidacy for membership on the United Nations Security Council for 2019 and hopes to gain the full participation rights in the United Nations to which it is entitled as a sovereign state;

Whereas at the opening of the 61st United Nations General Assembly in 2006, former United Nations Secretary-General Kofi Annan stated that "supporters of Israel feel that it is harshly judged by standards that are not applied to its enemies . . . and too often this is true, particularly in some UN bodies";

Whereas Israel has played an active role in the international community and within the United Nations;

Whereas Israel already sits on several important committees in the United Nations, and representatives from Israel have served as deputy chairs in the United Nations numerous times;

Whereas Israelis were first elected to notable United Nations positions in 1994, including the high administrative tribunal at the Hague, Vice Chair of the World Health Organization's Executive Committee and the Human Rights Committee, in June 2005 Israel's Ambassador to the United Nations, Dan Gillerman, was appointed one of the 21 new vice presidents of the General Assembly, and in July 2005, Israel was elected to deputy chairmanship of the United Nations Disarmament Commission (UNDC);

Whereas, on June 19, 2007, for the first time since Israel joined the United Nations, an Israeli diplomat, Mr. Ron Adam, Director of the Israeli Foreign Ministry's United Nations Political Affairs Department, was chosen to chair a United Nations committee, the Committee on Program and Coordination (CPC);

Whereas this 33 member body (composed of Argentina, Armenia, Belarus, Benin, Brazil, Bulgaria, the Republic of Central Africa, China, Comoros, Cuba, France, Ghana, Haiti, India, Indonesia, Iran, Italy, Jamaica, Japan, Kenya, Pakistan, Portugal, Korea, Russia, Senegal, South Africa, Switzerland, Uruguay, Venezuela, Zimbabwe, United States, and Israel) approves the work plan for all United Nations agencies and bodies;

Whereas Israel's first unique appointment to chair a United Nations committee will hopefully encourage the normalization of Israel's bilateral and multilateral relations and challenge future disproportionate United Nations condemnation of Israel;

Whereas anti-Semitic rhetoric and sentiment within United Nations fora have been of grave concern to the United States and other responsible nations;

Whereas United Nations General Assembly Resolution 3379 (1975) concluded that "Zionism is a form of racism and racial discrimination" and the General Assembly, by a vote of 111-25, revoked Resolution 3379 in 1991 in response to strong leadership by the United States;

Whereas the goals of the 2001 United Nations World Conference Against Racism were undermined by hateful, anti-Jewish rhetoric and anti-Israel political agendas, prompting both Israel and the United States to withdraw their delegations from the Conference;

Whereas, in 2004, at the first United Nations Department of Public Information Seminar on Anti-Semitism, former United Nations Secretary-General Kofi Annan acknowledged that "the United Nations' record on anti-Semitism has at times fallen short of our ideals"; and

Whereas, in 2005, the United Nations held an unprecedented session to commemorate the 60th anniversary of the liberation of the Auschwitz concentration camp: Now, therefore, be it

Resolved, That the House of Representatives—

(1) congratulates the Government and people of the State of Israel on Israel's first ever appointment to chair a United Nations committee;

(2) supports continued expansion of Israel's role at the United Nations;

(3) welcomes recent attempts by the United Nations to address the issue of prevailing anti-Semitism;

(4) calls on the United Nations to officially and publicly condemn anti-Semitic statements made at all United Nations meetings and hold accountable United Nations Member States that make such statements;

(5) urges the members of the United Nations' Western European and Others Group (WEOG) to extend full and permanent membership to Israel, without conditions, until such time as Israel can serve as an effective member of the Asian States Group of the United Nations; and

(6) calls upon United Nations Secretary-General Ban Ki-Moon to continue to work to end any unfair vilification of Israel at the United Nations and ensure Israel's full participation in, and access to, all international fora under United Nations auspices.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from New York (Mr. ACKERMAN) and the gentleman from South Carolina (Mr. WILSON) each will control 20 minutes.

The Chair recognizes the gentleman from New York.

GENERAL LEAVE

Mr. ACKERMAN. Madam Speaker, I ask unanimous consent that all Members may have 5 legislative days to revise and extend their remarks and in-

clude extraneous material on the resolution under consideration.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from New York?

There was no objection.

Mr. ACKERMAN. Madam Speaker, I rise in strong support of this resolution and yield myself such time as I may consume.

First, I want to thank Mr. HASTINGS and Mr. GREEN for their work on this important resolution congratulating the democratic State of Israel for achieving a significant victory in its long and tedious campaign to gain fair treatment at the U.N.

In June, an Israeli diplomat, Mr. Ron Adam, was chosen to chair a critical U.N. committee, the Committee on Policy and Coordination, which is responsible for approving the work plan for all U.N. agencies and bodies. Incredibly, in the entire history of the U.N., this is the first time an Israeli has been granted such a role.

For almost 60 years, since it became a member of the United Nations, Israel has been treated as a second-class citizen among the nations at the U.N. The greatest barrier to fair treatment for Israel has been its inability to achieve normal standing in one of the U.N.'s regional groupings. These groupings control committee assignments and leadership positions throughout the U.N. system.

Though geographically Israel should be a member of the Asia group, a cabal of anti-democratic and anti-Semitic states in that region, the Organization of the Islamic Conference, has conspired to exclude Israel from its rightful membership in that group. Only recently has Israel been granted qualified membership in another U.N. group known as the Western European and Others regional group.

□ 1415

This new status has allowed Israel to begin to obtain U.N. leadership positions. We must build on this momentum. H. Res. 624 does so by demanding that the Western European and Others Group, with which Israel now caucuses at the U.N., remove all remaining restrictions and qualifications on Israel's status as a member of that group. The resolution also expresses support for Israel's campaign to gain a rotational seat on U.N. Security Council.

Once again, Madam Speaker, I congratulate Israel for its election to serve as Chair of the Committee on Policy and Coordination. I also urge our good friend, U.N. Secretary General Ban Ki-Moon to use this positive step towards further increasing normalization of Israel's status at the United Nations. We must continue to work with the U.N. Secretary General who has made pressing normalization an important goal of his tenure. The unfair treatment of Israel at the U.N. undermines the very principles the United Nations is meant to embody. The spectacle of repressive regimes conspiring to deny

Israel, the only democratic state in the Middle East, normal status at the U.N. undermines the broader fight on behalf of the human rights and democracy.

Madam Speaker, I would urge all of our colleagues to support this very important resolution.

Madam Speaker, I reserve the balance of my time.

Mr. WILSON of South Carolina. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I rise in strong support of House Resolution 624, which congratulates the State of Israel for chairing a United Nations committee for the first time in its history. This accomplishment is long overdue. Israel, as a fully democratic and sovereign state, should be entitled to all of the privileges and opportunities of any member state of the United Nations.

Unfortunately, the anti-Semitism and anti-Israel bias that pervades the United Nations has long prevented Israel from fully participating in that body. To this day, Israel remains only a temporary member of the U.N.'s Western European and Others Group and is excluded from many consultations, discussions and leadership posts within the group and the U.N. itself.

The anti-Semitic, anti-Israel attitude shown by some members of the U.N. is unacceptable. It shames the principles of the United Nations. The United Nations has slowly begun to make progress in addressing this problem in restoring Israel to its rightful place at the U.N. However, there is much to be done, and this resolution calls upon U.N. Secretary General Ban Ki-Moon to resolve this disgraceful problem. Until this happens, the United Nations will not live up to its own charter where the preamble states that the U.N. was founded "To save succeeding generations from the scourge of war, to reaffirm faith in fundamental human rights, in the dignity and worth of the human person, in the equal rights of men and women and nations large and small."

In addition, Madam Speaker, Israel's ability to finally chair a U.N. committee is a well-deserved accomplishment for Israel and a privilege and honor for a U.N. that has not done nearly enough.

Madam Speaker, I want to thank my colleague and longtime friend from the State of Florida (Mr. HASTINGS) for introducing this resolution, and I urge its adoption.

Madam Speaker, I reserve the balance of my time.

Mr. ACKERMAN. Madam Speaker, I am pleased to yield to the gentleman from Florida, the very distinguished chairman of the Rules Committee on Legislative and Budget Process and a leader for human rights and dignity around the world, author of the resolution before us, ALCEE HASTINGS, such time as he may consume.

Mr. HASTINGS of Florida. I thank my friend from New York for yielding me the time.

Madam Speaker, I rise today in support of House Resolution 624, a resolution that I introduced with my good friend and fellow cochair of the Democratic Israel Working Group, Representative GENE GREEN.

I first want to thank my very good friend and cosponsor of this resolution, who yielded time to me Representative ACKERMAN, for his steadfastness not only on these issues, but of issues of critical import for foreign affairs of these United States.

I would also like to thank the chairman of the House Foreign Affairs Committee, my good friend, Representative TOM LANTOS, and the ranking member of the committee and my colleague from Florida, Representative ILEANA ROS-LEHTINEN, for helping move this important bipartisan bill forward, and my longstanding good friend today who spoke favorably today of this measure. I thank Representative WILSON for his comments on this legislation and others, as well.

On June 19, 2007, for the first time ever in history a representative of the State of Israel was chosen to chair a United Nations committee. This resolution serves to properly mark this unique triumph for the State of Israel in our history books. The man chosen for this distinctive appointment at the United Nations is Mr. Ron Adam, the former director of the Israeli Foreign Ministry's U.N. Political Affairs Department. The committee he was chosen to chair is the Committee on Program and Coordination. This 33-U.N. member body provides an important role to the functioning of the United Nations, approving the work plan for all United Nations agencies and bodies.

Madam Speaker, since it first joined the United Nations in 1949, the democratic State of Israel has been considered a second-class nation at the United Nations, unfairly subjected to unjustified repeated one-sided attacks from other nations. To this day, Israel is still denied full representation within the United Nations and its constituent agencies and bodies. Meanwhile, other rogue and repressive regimes, in violation of United Nations human rights principles, are afforded full rights and privileges.

The United Nations should not and cannot continue to be a vehicle for unilateral attacks against Israel. Such dealings truly undermine the United Nations' credibility, integrity and effectiveness. Shamefully, anti-Semitic rhetoric and sentiment within the United Nations remains pervasive. Such statements are of grave concern to the United States and responsible nations.

I want to commend both past and present United Nations leaders for publicly recognizing and speaking out against the existence of blatant biases and injustices within the United Nations walls. Despite the targeted discrimination and unwarranted hate it faces within this international forum, Israel has consistently played an active

role within the United Nations. Israel already sits on several significant committees in the United Nations, and representatives from Israel have served as deputy chairs in the United Nations numerous times.

I am hopeful that Mr. Adam's appointment to chair the CPC will help normalize Israel's bilateral and multilateral relations. I am also hopeful, as has been expressed by Representative ACKERMAN and Representative WILSON, that Secretary General Ban Ki-Moon of the United Nations will work to end the unfair vilification of Israel at the United Nations and to use his good offices to support Israel's bid to join the Asian regional grouping. Finally, I am hopeful that Israel will be granted membership on the Security Council for 2019 and gain full participation rights in the United Nations.

I am but one member of this institution. I know I speak for GENE, who probably is en route here, who has some other feelings by virtue of our cosponsorship of this matter. I urge this administration, as GENE GREEN and I have and others, to do everything it can to see Israel's ascension in the United Nations.

Israel's new appointment is the beginning of a new dawn for the nation's status within the United Nations. I congratulate the government and people of the State of Israel for this great accomplishment, and I urge my colleagues to vote "yes" on this important bipartisan legislation.

Mr. WILSON of South Carolina. Madam Speaker, I reserve the balance of my time.

Mr. ACKERMAN. Madam Speaker, it is my pleasure to recognize the gentlewoman from the First District of Nevada, a member of the Veterans' Affairs Committee and Ways and Means Committee, SHELLEY BERKLEY, for such time as she may consume.

Ms. BERKLEY. Madam Speaker, I thank the gentleman from the great State of New York and my good friend from the State of Florida for introducing this important resolution. For too long, dictators and despots have hijacked the United Nations in order to serve their own purposes. They cynically target Israel in order to shift attention from their own brutality, passing countless resolutions condemning Israel without uttering a word about what is going on in Burma, the Sudan or North Korea.

Madam Speaker, while we congratulate Israel today for a great achievement, I am still very worried the U.N.'s condemnations of Israel helped to stoke the fires of global anti-Semitism. For better or for worse, the world looks to the United Nations to set standards for human rights, and when instead it singles out Israel for constant recriminations, the U.N. becomes a platform for burgeoning anti-Semitism around the world and anti-Israel rhetoric. Last week I chaired the Transatlantic Legislators' Dialogue in my hometown of Las Vegas, Nevada. Among the many

issues we discussed with our friends from the European Parliament was the alarming rise of global anti-Semitism. Abe Foxman, the national director of the Anti-Defamation League briefed us on the widespread belief in the Muslim world that Israel and the Jews committed the 9/11 terrorist attack on this country. He told us about Malaysia, where there are no Jews, and yet where the president of that country blames the Jews for the economic problems in his country anyway.

In Europe, since 2000, there has been a surge of anti-Semitic incidents. Even here at home, a few misguided and uninformed people say the Jews are somehow responsible for the war in Iraq. I am extremely concerned about the rise of anti-Semitism globally, and it is not unrelated to what goes on at the United Nations. I am afraid the U.N.'s rhetoric serves as a great recruiting tool for terrorists and anti-Semites when it condemns Israel and uses old anti-Semitic canards to do it.

Madam Speaker, it is surely a step in the right direction that Israel is chairing a U.N. committee. We are right to congratulate Israel for this great achievement. It is about time. But so much more must be done as this resolution states. Today, with this resolution, we call on the United Nations to officially and publicly condemn anti-Semitic statements made at its meetings and hold United Nations member states accountable when they make such statements. We must fight back against the growing scourge of global anti-Semitism and growing anti-Israel rhetoric while we continue to fight for Israel's greater recognition at the United Nations.

I thank the gentleman from New York for his leadership on this issue, among many others.

Mr. KIRK. Madam Speaker, as a cosponsor of H. Res. 624, I rise in strong support of this bipartisan resolution and urge its adoption.

For the first time in history, the State of Israel will serve as the chair of a United Nations Committee. We congratulate Mr. Ron Adam for his appointment as Chair of the U.N. Committee on Program and Coordination and wish him much success in this historic post.

While this appointment gives us hope of reform at the United Nations, other U.N. organs continue on a path of anti-Semitism with irrational vilification of the Jewish State.

In 2006, the United Nations took 135 actions against the State of Israel for alleged violations of human rights. By contrast, the U.N. took only 69 actions against Sudan—home to a genocide in Darfur—and only 23 actions against Iran, where the government is carrying out an ethnic cleansing campaign against its Baha'i minority.

In its first year of existence, the U.N. Human Rights Council passed 10 resolutions condemning Israel, while passing only one resolution condemning Sudan.

And we all remember the infamous U.N. "Day of Solidarity with the Palestinian People" nearly 2 years ago when U.N. officials proudly displayed a map of the Middle East without the State of Israel.

For several years, I have worked with my colleagues to pressure U.N. members to end

their anti-Israel obsession. Israel's appointment to the U.N. Committee on Program and Coordination is the first fruit of our labor. But we know there is a long way to go to end anti-Semitism at the United Nations.

I want to thank my friend, Mr. HASTINGS, for introducing this important resolution, and Chairman LANTOS and Ms. ROS-LEHTINEN for their continued leadership on this issue.

□ 1430

Mr. WILSON of South Carolina. Madam Speaker, I urge support of the resolution, and I yield back the balance of my time.

Mr. ACKERMAN. Madam Speaker, I yield back the balance of my time, urging all of our colleagues to vote for the resolution.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from New York (Mr. ACKERMAN) that the House suspend the rules and agree to the resolution, H. Res. 624, as amended.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the resolution, as amended, was agreed to.

The title was amended so as to read: "A resolution congratulating the State of Israel on chairing a United Nations committee for the first time in history, and for other purposes."

A motion to reconsider was laid on the table.

EXPRESSING SENSE OF THE HOUSE REGARDING SYRIA'S CONTINUED INTERFERENCE IN THE AFFAIRS OF LEBANON

Mr. ACKERMAN. Madam Speaker, I move to suspend the rules and agree to the resolution (H. Res. 738) expressing the sense of the House of Representatives regarding the Government of Syria's continued interference in the internal affairs of Lebanon.

The Clerk read the title of the resolution.

The text of the resolution is as follows:

H. RES. 738

Whereas in 2004, Lebanon's current president had his term extra-legally extended through the interference of Syria in Lebanon's internal affairs;

Whereas former Lebanese Prime Minister Rafiq Hariri, the leading opponent of continued Syrian domination of Lebanon and the extra-legal extension of the president's term, was assassinated along with 22 people by a massive car bomb on February 14, 2005;

Whereas investigators from the United Nations have suggested that officials of Syria's government, at the highest levels, appear to be culpable for the assassination of Rafiq Hariri and the 22 other people;

Whereas the people of Lebanon, following the murder of Rafiq Hariri, engaged in a massive popular revolt known as the Cedar Revolution against Syrian interference in their internal affairs and suppression of their national sovereignty;

Whereas the Cedar Revolution, reinforced by international pressure, culminated in the rapid withdrawal of Syrian occupation forces and free elections;

Whereas the current Lebanese government has been under steady attack by domestic

and foreign forces that have been engaged in instigating riots and insurrection, suspending the operation of Lebanon's parliament, and perpetrating horrific acts of terror against the Lebanese people;

Whereas Syria and Iran are seeking to dominate Lebanon through their campaign of murder and intimidation aimed at the Lebanese parliamentary majority and other anti-Syrian public and political figures;

Whereas Syria and Iran, through their Lebanese proxies, have demanded the selection of another Lebanese president hand-picked by the Government of Syria;

Whereas Syria and Iran, in clear contravention of numerous United Nations Security Council resolutions, notably 1559 (2004), 1655 (2006), 1664 (2006), 1680 (2006), 1701 (2006), and 1757 (2007), have grossly violated Lebanon's sovereignty by continuing to provide arms to illegitimate Lebanese militias, Palestinian terrorist groups and other terrorist organizations; meddling in Lebanon's internal political affairs; and actively supporting efforts to prevent the election of a new president in accordance with Lebanese law; and

Whereas a sovereign and independent Lebanon is in the national security interest of the United States: Now, therefore, be it

Resolved, That the House of Representatives—

(1) condemns the campaign of murder, terror, and intimidation aimed at overthrowing the democratically-elected government of Lebanon and establishing a new Lebanese government subservient to the will and interests of Syria and Iran;

(2) condemns Syria and Iran for their gross interference in Lebanon's internal political affairs, and particularly, the selection of a new president, and gross violations of United Nations Security Council resolutions protective of Lebanon's sovereignty and independence;

(3) condemns Lebanese political parties and actors who have allied themselves with Syria and Iran to the detriment of their own country and its national interests;

(4) condemns efforts by some Lebanese political figures to obstruct, delay, and impede the legal and established processes of their country for the selection of a new president according to the rule of law;

(5) affirms its continued strong support for Lebanon's democratically-elected government, people and national sovereignty, and its readiness to provide material support;

(6) calls on all nations to recognize and support Lebanon's sovereignty and independence; and

(7) urges the President to use all peaceful means at the disposal of the United States to help safeguard Lebanon's sovereignty and independence.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from New York (Mr. ACKERMAN) and the gentleman from South Carolina (Mr. WILSON) each will control 20 minutes.

The Chair recognizes the gentleman from New York.

GENERAL LEAVE

Mr. ACKERMAN. Madam Speaker, I ask unanimous consent that all Members have 5 legislative days within which to revise and extend their remarks and include extraneous material on the resolution under consideration.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from New York?

There was no objection.

Mr. ACKERMAN. Madam Speaker, I rise in strong support of this resolu-

tion, and yield myself such time as I may consume.

Madam Speaker, when the House last discussed Lebanon on September 25, I said that Lebanon was being bullied. That statement, though true, is insufficient. Lebanon is not being harassed by invisible unworldly forces. Lebanon is not a victim of fate or destiny or bad luck. Lebanese politicians and public figures, beginning with Rafiq Hariri and continuing to this day, are not being assassinated and blown away by falling meteors or volcanic eruptions. Arms do not appear in Lebanon by magic. Hezbollah's billions do not fall from the sky like rain. Palestinian terrorist groups don't find rifles falling out of trees or by the side of the road. The Fatah al-Islam and its war against the Lebanese state were not the product of spontaneous auto-genesis. Like maggots, their origin can escape the casual observer, but their birth was no accident or mystery.

Madam Speaker, Syria and Iran are responsible for these crimes. Syria and Iran are responsible for the chaos. Syria and Iran are to blame for the shadow of civil war that hangs over Lebanon. Lebanese politics are complex, and the interaction within and among confessions is daunting for the outside observer to contemplate. Where interest and principle merge and depart is hard to judge. But we know some things about Lebanon for certain, and they are spelled out clearly in the resolution at hand.

Despite Lebanon's Constitution, Syria demanded the extension of President Emile Lahoud's term in 2004, and Damascus got its way. The principal opponent of this grotesque intrusion into Lebanon's affairs was Prime Minister Rafiq Hariri. There is credible evidence uncovered by U.N. investigators showing that Syrian President Bashar al-Assad first threatened and then ordered the assassination of Rafiq Hariri for his defiance of Syrian diktat.

Madam Speaker, in response to the murder of Hariri, and, let us remember, 22 other civilians, the Lebanese rose up against their Syrian overlords and demanded, with the full support of the international community, the expulsion of Syria's occupational forces. A new government was formed through a free and fair election led by Lebanese not in the service of Syria and not in the debt of Iran.

This development, both surprising and hopeful, of a Lebanon free to chart its own course, was one that Syria and Iran couldn't tolerate. In their minds, Lebanon is a fiefdom, a toy. Lebanon is a playground for their ambitions and a canvas on which to splash their rage and hatred for the United States and Israel in the modern world.

Madam Speaker, Lebanon, in the minds of Syria's overlords and Iran's ayatollahs, is not for the Lebanese. This intolerance, this greedy self-interest, this bitter contempt for the rights of others is why we are speaking of Lebanon in the U.S. House of Representatives again today.

Lebanon is in grave peril. Lebanon's independence and sovereignty are under attack by Syria and Iran and their bootlicking Lebanese proxies, Hezbollah, Amal and the Aounist bloc. Extralegally demanding control of the presidency, and threatening civil war, this coalition of the wicked and the selfish have again brought chaos, violence and terror to Lebanon. It need not be so. It should not be so.

Syria and Lebanon are responsible for the crisis in Lebanon. Syria and Iran are responsible for the crisis in Lebanon. They have trampled on Lebanon's sovereignty and clearly violated U.N. Security Council resolutions protective of Lebanon. They are the puppet masters pulling on the strings of Hezbollah, Amal and Aoun. The assassinations of Lebanese members of Parliament are their work. The bombings are their work. The threats to establish an extra-legal second government are their work.

Madam Speaker, there is no mystery here. There is evil, there is greed, there is indecency, and, were I Lebanese, I might say treason as well. But there is no mystery. Syria and Iran are attacking Lebanon's sovereignty no less than if they sent a fleet of bombers, or a wave of tanks, or a swarm of infantry. That this aggression, this naked aggression is being done by proxies, and by terrorists, by car bombs, by telephone threats does not make it any less aggression, or any less a crime.

Many vital interests of the United States are at stake. If we want every nation to be secure in its own borders, we cannot tolerate cross-border aggression. If we want to see the Middle East at peace, we cannot tolerate the resumption of Syrian and Iranian control of Lebanon. If we want to encourage self-governance around the world, we cannot tolerate Lebanon's democracy being subverted by thugs and fanatics. If we want to see people rising up against tyranny, as they are today in Burma, we cannot tolerate the reversal of Lebanon's glorious Cedar Revolution. If we want to see the United Nations become a true guardian of peace, we cannot tolerate the will of the international community being scorned by rogue states.

Madam Speaker, America must lead. Even today, even with Iraq, there is still no other state that can mobilize the international community as can the United States, and the hour is desperate. Only if they are convinced that the world will not tolerate their aggression against Lebanon, will Syria and Iran back down. This outcome is not impossible.

The stakes are exceedingly high. It is my hope that the Lebanese Government and the Bush administration will see this debate in the House as proof that Congress is watching closely and that we stand ready to help secure Lebanon's future as an independent and sovereign state. If we want to end the bloodshed in Lebanon and foreclose the prospect of still greater violence, we

must act now and in concert with the community of nations.

There is wide support for Lebanon both in Europe and the Arab and Muslim world, just waiting for a catalyst to give it expression. America must be that catalyst. We are here today to sound the wake-up call. A brighter future for Lebanon, for the Middle East, and for ourselves awaits our clarion call.

Madam Speaker, I urge our colleagues to support the resolution.

Madam Speaker, I reserve the balance of my time.

Mr. WILSON of South Carolina. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I support this resolution, which condemns both Syria and Iran for their continuing campaign of murder and intimidation aimed at anti-Syrian politicians and public figures of Lebanon. It warns them against interfering either directly or through their many representatives in the Lebanese presidential elections scheduled for later this month.

Over 2 years after the Cedar Revolution, and despite the withdrawal of Syrian troops, Lebanon's fragile government continues to be targeted for destruction by internal and external threats. Hezbollah has continued to carry out its strategy of assassinating anti-Syrian Lebanese politicians. The aim is to gain a parliamentary majority that would allow both Syria and Iran to impose their choice for a president on the Lebanese people.

Furthermore, the inclusion of pro-Syrian, Iranian and terrorist organizations such as Hezbollah in the Lebanese political process only empowers the Syrian and Iranian regimes and holds Lebanon hostage to their whims. Allowing a terrorist entity to use the political process and legitimize itself without first demanding a renouncement of violence has only served to perpetuate and enhance the threat.

We support the underlying intent of this resolution, which is to advocate for the sovereignty and political independence of Lebanon. The Lebanese people deserve the right to be free of interference and intimidation by any outside country or terrorist group. However, despite supporting the resolution, we are concerned about language in this resolution referring to the entire Lebanese Parliament as "democratically elected," because it sets a dangerous precedent by both legitimizing and providing congressional approval for the role of a foreign terrorist organization in the political process in Lebanon. Sadly, it legitimizes current election law which was constructed by the Syrians and imposed on the Lebanese people.

Finally, it undermines the very essence of United Nations Security Council Resolution 1559, aimed at truly removing Syria from the Lebanese political process. Elections conducted under a Syrian-controlled electoral process

where foreign terrorist organizations are allowed to participate without first requiring them to lay down their weapons should not be considered "democratic" by this Chamber.

Madam Speaker, the United States and other responsible nations must encourage the Government of Lebanon and leading Lebanese policymakers not to compromise on their commitment to reform the political process by purging from it the influence of Syria, Iran and Hezbollah. Our support for the Lebanese people and the pro-democracy forces in Lebanon is vital to counterbalance the pressures surrounding Lebanon.

The brave people of Lebanon continue to stand against the tyrannical regime in Damascus, and they deserve nothing less than our support. It is for this reason that, despite reservations about the implications of some of the clauses in this resolution, I will vote for this resolution, and ask my colleagues to do the same.

I especially remember Congressman LAHOOD being prophetic. Last year I attended a White House meeting with the President of members of both parties giving reports on their recent trips to Iraq. Congressman LAHOOD pointed out progress in Iraq, but he also stated the public needed reassurance of the capture or killing of the al Qaeda leader in Iraq, Zawahiri. Just as he concluded, National Security Advisor Stephen Hadley, sitting next to me, received an important cell call which he took and then several hours later could announce: the butchering beheader Zawahiri had been killed by a successful American airstrike.

Madam Speaker, I reserve the balance of my time.

Mr. ACKERMAN. Madam Speaker, it is my pleasure to yield such time as she may consume to the gentlewoman from Nevada (Ms. BERKLEY).

Ms. BERKLEY. Madam Speaker, I rise today in support of this important resolution, and I thank the gentleman from New York for his continued leadership on this important issue. We often throw around compliments on the floor of the House thanking each other, but in this case, it is truly warranted. The gentleman from New York has been a giant on these issues, and I thank him so much for that.

Lebanon is at a critical juncture in its history. On the cusp of upcoming elections, it can go the way of democracy; or it can go the way of violence, terrorism and dictatorship. We therefore must stand side-by-side with the forces of democracy in that country and protect it from those who seek to unfairly and violently influence the results of their free election.

Two years ago at the United Nations, the world called on Syria to remove its troops from Lebanon and recognize Lebanon's independence. While perhaps most of Syria's troops are out of Lebanon, its continued dangerous influence is undeniable.

Syria's proxies in Lebanon have waged a campaign of terror throughout the country against those who oppose its interference. They have bombed,

they have rioted, they have assassinated, and they have terrorized, and it is undeniable Syria's hand is behind it all.

Iran too has involved itself in Lebanon with its support of Hezbollah, a terrorist group whose military is stronger than the Lebanese Army. Iran has threatened unspecified consequences if the anti-Syrian majority has the gall to freely elect its own president. It has launched attacks against Israel to destabilize the region and the Lebanese Government. Hezbollah continues to bring arms shipments in from Iran through Syria with impunity.

Lebanon's stability could be the key to the future of the Middle East. If the Lebanese can establish a democracy in their country, then it would spread to other countries in that region, Syria's influence would be weakened and Iran's plans for regional supremacy and control would suffer a serious setback. The supporters of terrorism know this, Madam Speaker. That is why they have unleashed this campaign of terror to stop Lebanon's development and influence its upcoming election.

We too must unleash our own campaign to support the forces of democracy and freedom and stability. We must not let the forces of democracy be defeated or intimidated in Lebanon. The Middle East hangs in the balance, and we must not back away from a growing democracy that needs our help.

Madam Speaker, I urge support for this resolution.

Mr. WILSON of South Carolina. Madam Speaker, I yield such time as he may consume to the gentleman from Illinois (Mr. LAHOOD), an esteemed member of the Committee on Appropriations and a distinguished American of Lebanese heritage.

Madam Speaker, prior to yielding, I want to note that Mr. LAHOOD has announced he will not be running for reelection next year. I want all of us to acknowledge that he will truly be missed. When I was elected 6 years ago, one the first persons I found out who has the respect of the Members here is indeed RAY LAHOOD. He has made such a great difference for the people of the United States.

(Mr. LAHOOD asked and was given permission to revise and extend his remarks.)

□ 1445

Mr. LAHOOD. Madam Speaker, I thank the gentleman very much for his kind remarks.

Madam Speaker, I rise today in strong support of H. Res. 738, a resolution that strongly condemns the ongoing campaign of violence and assassination directed towards the people of Lebanon and their democratically elected government.

We have all seen the horrific news reports of the assassinations and attempted assassinations of anti-Syrian lawmakers in Lebanon. The brave men

and women who are struggling to move Lebanon forward have become targets in their own country. Hezbollah and the pro-Syrian factions in Lebanon know they are in the minority, and have begun a desperation campaign to kill as many of their opponents as possible. Members of the parliament have had to go into hiding outside of Lebanon, and lay their lives on the line when they return to conduct government business.

Others in Lebanon have embarked on a campaign to delay and obstruct the presidential election process, now delayed since September, late September into October. Rather than face the fact that those who wish for Lebanon to be independent and free will be successful, they choose instead to upend the entire political process rather than see democracy succeed. This was clearly evident in 2004 when the current president of Lebanon had his term extended with the help of Syria and other outside forces, an act that was quickly condemned by the United States and the United Nations. Unfortunately, these forces continue to try to impose their will on Lebanon today.

The Cedar Revolution in 2005 led to the withdrawal of Syrian forces that had occupied Lebanon for more than three decades. After the withdrawal, the government of Prime Minister Siniora committed to creating a strong, democratic Lebanon, free of occupation or outside influence. Lebanon is fighting many enemies of freedom, both within and outside the country.

As Lebanon prepares for presidential elections, hopefully in a few weeks, I believe it is vital that we reiterate our support for Lebanon and the people of Lebanon. This resolution reaffirms our support of the many United Nations resolutions that condemn Syria and Iran for their continued roles in arming the enemies of a free Lebanon, and expresses our appreciation to the many countries who have contributed funding and personnel to the United Nations Interim Force in Lebanon.

Our Lebanese friends must know that we stand beside them as they continue to strengthen their government. I want to particularly compliment President Bush, Secretary Rice, and the whole Bush team for the interest they have expressed in Lebanon, for the interest they have shown in this country and their ability to have a democracy and to hold elections.

Last week, the son of Rafiq Hariri was in Washington and had an opportunity to meet with many officials of the Congress and of the Bush administration. I know he was gratified by the support he has received from Congress and from the Bush administration. As he returned to Lebanon, I know he went reassured that our country is with Lebanon, that our country is for free elections as soon as possible.

I also want to compliment Speaker PELOSI who has personally discussed this issue with me and has a great deal of interest in Lebanon, and recently

took the time to travel to Lebanon on a recent trip to the Middle East. Her interest in this country is something that we should all commend. And so I urge the adoption of this resolution.

Mr. ACKERMAN. Madam Speaker, I just want to add to the comments by our good friend Mr. LAHOOD. He will surely be missed in this great Chamber. He has added much to the dignity, fairness, objectiveness and to the thoughtfulness of this body. And I hope when decency, security and peace does return to Lebanon, he will be in this Chamber with us to share in that moment.

Mr. WILSON of South Carolina. Madam Speaker, I have no more speakers, I urge support for the resolution promoting the Cedar Revolution, and I yield back the balance of my time.

Mr. ACKERMAN. Madam Speaker, I too want to thank Speaker PELOSI for her leadership, for taking her time during her trip to the Middle East to visit Lebanon, and also to try to talk sense to the people in Syria as well.

Ms. PELOSI. Madam Speaker, the United States has a long and deep history of supporting the sovereignty and independence of the Lebanese people. That is why we must condemn in the strongest terms possible continued Syrian and Iranian interference in Lebanese affairs.

The Lebanese parliament is currently engaged in the process of selecting a new president, a task unfortunately complicated by the meddling of outsiders, most notably Syria and Iran, and their terrorist proxy in Lebanon, Hezbollah. Syrian and Iranian interference in Lebanon must be condemned by the international community in the strongest possible terms and it must immediately end.

The resolution before the House chronicles the tragic toll exacted on Lebanon and its people by its neighbors. It is a tale of a peaceful people seeking a better future who again and again have seen their hopes dashed due to the cruel and opportunistic machinations of Iran and Syria.

I recently met for the second time this year with Sheikh Saad Hariri, the leader of the majority in the Lebanese parliament, whose family has given so much for the freedom of the Lebanese people. Mr. Hariri made an eloquent appeal for help from the Congress of the United States and other parliamentary bodies to expose the interference of non-Lebanese groups in the selection of Lebanon's next president. I commend the bipartisan leadership of the House Foreign Affairs Committee for acting quickly so the House could go on record against these tactics before the next meeting of the Lebanese parliament later this month.

The politically-motivated violence that has been so much a part of Lebanon's recent history has not dampened the desire of the Lebanese people for self-determination.

The Cedar Revolution was an eloquent and powerful testament to that fact; a fact which deserves the respect of all nations. Passage of this resolution puts the House squarely on the side of the freedom-loving people of Lebanon and I urge its adoption.

Mr. ACKERMAN. I yield back the balance of my time.

The SPEAKER pro tempore (Mrs. CAPPS). The question is on the motion

offered by the gentleman from New York (Mr. ACKERMAN) that the House suspend the rules and agree to the resolution, H. Res. 738.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the ayes have it.

Mr. LAHOOD. Madam Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX and the Chair's prior announcement, further proceedings on this motion will be postponed.

25 BY 25 RESOLUTION

Mr. PETERSON of Minnesota. Madam Speaker, I move to suspend the rules and agree to the concurrent resolution (H. Con. Res. 25) expressing the sense of Congress that it is the goal of the United States that, not later than January 1, 2025, the agricultural, forestry, and working land of the United States should provide from renewable resources not less than 25 percent of the total energy consumed in the United States and continue to produce safe, abundant, and affordable food, feed, and fiber.

The Clerk read the title of the concurrent resolution.

The text of the concurrent resolution is as follows:

H. CON. RES. 25

Whereas the United States has a quantity of renewable energy resources that is sufficient to supply a significant portion of the energy needs of the United States;

Whereas the agricultural, forestry, and working land of the United States can help ensure a sustainable domestic energy system;

Whereas accelerated development and use of renewable energy technologies provide numerous benefits to the United States, including improved national security, improved balance of payments, healthier rural economies, improved environmental quality, and abundant, reliable, and affordable energy for all citizens of the United States;

Whereas the production of transportation fuels from renewable energy would help the United States meet rapidly growing domestic and global energy demands, reduce the dependence of the United States on energy imported from volatile regions of the world that are politically unstable, stabilize the cost and availability of energy, and safeguard the economy and security of the United States;

Whereas increased energy production from domestic renewable resources would attract substantial new investments in energy infrastructure, create economic growth, develop new jobs for the citizens of the United States, and increase the income for farm, ranch, and forestry jobs in the rural regions of the United States;

Whereas increased use of renewable energy is practical and can be cost effective with the implementation of supportive policies and proper incentives to stimulate markets and infrastructure; and

Whereas public policies aimed at enhancing renewable energy production and accelerating technological improvements will further reduce energy costs over time and increase market demand: Now, therefore, be it

Resolved by the House of Representatives (the Senate concurring), That it is the sense of Congress that it is the goal of the United States that, not later than January 1, 2025, the agricultural, forestry, and working land of the United States should provide from renewable resources not less than 25 percent of the total energy consumed in the United States and continue to produce safe, abundant, and affordable food, feed, and fiber.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Minnesota (Mr. PETERSON) and the gentleman from Virginia (Mr. GOODLATTE) each will control 20 minutes.

The Chair recognizes the gentleman from Minnesota.

Mr. PETERSON of Minnesota. Madam Speaker, I yield myself such time as I may consume.

I rise today in support of H. Con. Res. 25, and urge its adoption by the House. H. Con. Res. 25 embodies the vision of farmers and ranchers who have been leaders in renewable energy and land conservation activities, and recognizes that forestry and agriculture will play a leading role in our country's transitions to energy independence. The 25x'25 Resolution sets a national energy independence goal that by the year 2025, 25 percent of the total energy consumed in the United States should come from homegrown, renewable sources.

This resolution has received strong bipartisan support, was passed out of the House Agriculture Committee under my good friend, Mr. GOODLATTE's leadership last year, and again in May under the new Congress. The 25x'25 Resolution has been carefully crafted to set national renewable energy production targets, while allowing farmers, ranchers, entrepreneurs and industry the flexibility needed to reach these important goals.

Madam Speaker, the new face of energy security and rural development is in the form of a biofuels plant, a gasifier, a windmill, a methane digester or any other technology that will reduce dependence on foreign energy sources. In times of high energy prices, I can think of no one better to supply the United States with a renewable source of energy than the same American farmers and ranchers who have provided the United States and the world with an abundance of safe food and fiber.

Expanding the production and the use of renewable energy is an important priority, not just for agriculture, but for the entire country in our pursuit of energy independence. The 25x'25 Coalition has grown over the past several years, and now includes endorsements from more than 590 business, conservation, agriculture and forestry organizations. As renewable energy use continues to expand, new innovations, including the promising growth of cellulosic ethanol, will not only provide for our energy needs; they will also produce environmental and conservation benefits.

I think the future of energy production from agriculture and forestry is

the most exciting thing that has happened in rural America in my lifetime. The 25x'25 Resolution states our commitment to support the development of renewable energy sources. I believe we can not only meet but exceed the goal of 25 percent by the year 2025.

But every journey starts with a first step, and this resolution is a very important first step that we can take in achieving this energy independence.

Madam Speaker, I thank my colleagues for their support and again urge the support of the House for the passage of this resolution.

Madam Speaker, I reserve the balance of my time.

Mr. GOODLATTE. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I would first like to thank the gentleman from Minnesota, the chairman of the committee, for his leadership in bringing this resolution before the Congress again, and the gentleman from Pennsylvania, Mr. HOLDEN, for his involvement in this as well.

The resolution, also known as 25x'25, recognizes the importance of agriculture in meeting our energy needs and sets a noble goal for American agriculture: to produce 25 percent of the total energy consumed in the United States from the renewable resources of our agriculture, forestry and working lands by the year 2025.

We have made significant progress in developing a robust industry using agricultural crops as well as animal waste to produce ethanol and biodiesel. In 2006 alone, the renewable fuels industry added more than 1.05 billion gallons of new ethanol to the marketplace. It is projected that without any new technological breakthroughs, the industry already has the potential to produce more than 11 billion gallons per year within the next decade.

While the domestic production of energy has been exciting, there are still many renewable energy sources yet to be explored and developed. There are a wide variety of agricultural products and by-products that can be converted to clean, renewable energy sources. In fact, there are sources of renewable energy in every one of our 50 States, including wind, solar, hydropower and biomass. The development of cellulosic technology has enormous potential to bolster the renewable fuel market inside the corn belt and well beyond.

I am particularly excited about the opportunity to use forest biomass as a component of our renewable energy supply. Forest biomass is plentiful and available in many States. Almost two-thirds of the Commonwealth of Virginia is forested, as is much of the southeastern United States. In fact, today we have roughly the same amount of forest land as we had 100 years ago. Trees are an abundant resource and are available for conversion into both wood products and biofuels year-round.

Every year we grow almost twice as much forest biomass as we harvest.

This wood and wood waste has the potential to produce enough electricity to power 43 million households, or enough ethanol to increase our domestic supply by almost 10-fold. As we find more ways to use forest biomass in our energy supply, we also have the opportunity to improve forest health, removing materials that fuel wildfires and insect and disease infestations.

Renewable energy development can create valuable markets for many of the waste materials which are currently a burden on America's farmers, such as animal waste, harvest by-products and damaged crops. Farmers continue to face steep environmental regulations in handling animal waste, and converting this waste into renewable fuels is a win-win for farmers and the environment. In fact, I would like to see the word "waste" taken out of American agriculture since almost everything produced on our farms can be used or reused for some other purpose.

The current tax credits and renewable fuels standard, along with the phaseout of MTBE, has helped fuel investment in new ethanol and biodiesel plants, and created more markets for agriculture products. It is obvious that current policies have successfully established a thriving, renewable fuels market. We should now focus on policy that will develop commercial cellulosic ethanol and allow new markets to drive production.

□ 1500

New proposed initiatives are extremely ambitious and can only be achieved with contributions from all areas of the agriculture sector, including grains, plants, trees and wood waste, vegetable oil, and animal fat and waste.

The 2002 farm bill included the first-ever energy title with programs to help renewable fuel producers purchase and expand operations and purchase feedstocks and also established programs to make grants and loans to farmers, ranchers and small businesses to purchase renewable energy systems and make energy efficiency improvements on farming operations.

The energy title of the House's 2007 farm bill builds on the 2002 bill by providing nearly \$3 billion to promote the commercial production of cellulosic ethanol. These initiatives will help farmers and forest owners by creating new markets and income opportunities to keep them on the land and keep their land working. At the same time, greater focus on cellulosic feedstocks can reduce our reliance on corn for renewable fuels.

Increased development of renewable energy opens new markets for our Nation's producer; provides consumers with a safe, sustainable, environmentally friendly and renewable source of energy; and decreases our Nation's dependency on foreign oil.

25x'25 is a vision we can all get behind, as 600 groups already have, including agriculture and forestry

groups, as well as business and environmental organizations. Over 20 of our Nation's Governors, along with 72 bipartisan cosponsors in the House, have recognized that this is a goal, though challenging, that is worth striving for.

I encourage my colleagues to join us in recognizing the important role American agriculture plays in domestic energy production and work with us to turn the goal of 25x'25 into a reality.

Madam Speaker, I reserve the balance of my time.

Mr. PETERSON of Minnesota. Madam Speaker, I yield such time as he may consume to the gentleman from Pennsylvania (Mr. HOLDEN), the chairman of the Conservation, Credit, Energy, and Research Subcommittee.

Mr. HOLDEN. Madam Speaker, I thank the chairman for yielding me time and thank him for his leadership and that of Mr. GOODLATTE, leadership in his role as ranking member and former chairman of the committee, on this very important issue.

Madam Speaker, we have an energy crisis in this country, and we need to take advantage of our own natural resources. This piece of legislation before us today is going to address the resources under our jurisdiction as members of the Ag Committee, but I would be negligent as a proud son of the coal regions of Pennsylvania, the anthracite coal fields, if I didn't mention that I hope that future pieces of legislation that come before this body also address the opportunity of coal-to-liquid, how we need to take advantage of the vast resources that we have in coal in this country.

I would say to those who criticize the environmental aspects of coal-to-liquid to just come to my home in St. Clair, Pennsylvania, in Schuylkill County and look at 200-to 300-foot comb banks, waste coal, that can be cleaned up and made into liquid fuel. So I hope in future proceedings before this House we're able to address that.

But I stand here proudly as a member of the Ag Committee and chairman of the Energy Subcommittee, in cooperation with my chairman and ranking member, to support this legislation.

As was mentioned by the chairman and the ranking member, we have an abundance of agriculture resources that we need to take advantage of in this country; and if we do not, we will remain to be dependent on the smooth, continuous flow of oil out of the Persian Gulf and Mexico and Venezuela. We have an opportunity to do something beginning today.

As we were writing the 2007 Ag bill, members of my subcommittee, we traveled to Penn State, to NC State, to the USDA labs and looked at the research that is being done on cellulosic ethanol and biodiesel; and when you look at the possibilities of the entire country, not one region excluding another, having the ability to participate in a move towards energy independence, when we look at cellulosic ethanol or biodiesel in the feedstocks that are so abundant,

it's absolutely imperative that we take advantage of those and pass this legislation today.

As the ranking member mentioned, in the energy title we have in excess of a \$2 billion loan guarantee program to help this infant industry take hold and allow the people on Wall Street, the investors, the private sector to be partners with the government as we move this forward.

So, Madam Speaker, I rise today in strong support of this legislation and urge its adoption.

Mr. PETERSON of Minnesota. Madam Speaker, I am pleased to yield such time as he may consume to the gentleman from Wisconsin (Mr. KAGEN), a new member of our committee who has been a leader on this issue as well as many others.

Mr. KAGEN. Madam Speaker, I thank Chairman PETERSON and thank Ranking Member GOODLATTE for allowing me to participate on a bipartisan committee, a committee whose example should be followed by the remainder of this Chamber. It has been a great pleasure for me to participate on this Agriculture Committee.

My home State of Wisconsin has been a leader on this issue of renewable energy. Why? Because we need an energy policy today that is not put together behind closed doors but out in the open, in a committee forum and here on the House floor.

Wisconsin has established its own renewable energy standard of 10 percent renewable by 2015, and judging by today's oil price that may reach \$85 per barrel, it can't come too soon.

This resolution of 25x'25, which I'm a proud cosponsor of, indicates our Nation's desire to become energy independent. By declaring our intent to provide 25 percent of our Nation's energy from renewable sources by 2025, we're taking a critical step in securing the energy and environmental needs of our future generations.

As a member of the Ag Committee, I know the potential of our farms, the potential of our forests, especially in northern Wisconsin, and the potential of our working lands across the country. If we achieve the goals outlined in this resolution, we will not only provide for our Nation's energy requirements, but we'll also develop innovative industries and supply countless numbers of new jobs in this developing field of renewable energy and at the same time will continue to guarantee that we will all serve our Nation well as a leader in the world.

Madam Speaker, it is no surprise today that we need a new energy policy, and this is a great start to a great new beginning.

Mr. GOODLATTE. Madam Speaker, I reserve the balance of my time.

Mr. PETERSON of Minnesota. Madam Speaker, I am now pleased to yield such time as she may consume to the gentlelady from South Dakota (Ms. HERSETH SANDLIN) who has been a leader on renewable energy in her State and in the country for a long time.

Ms. HERSETH SANDLIN. Madam Speaker, I thank the gentleman from Minnesota for yielding.

I rise today in strong support of House Concurrent Resolution 25, commonly referred to by my constituents, and it sounds like the constituents of many others, as 25x'25. I'm an original cosponsor of this resolution, and I commend Chairman PETERSON and Ranking Member GOODLATTE for their superb leadership on advancing this important resolution, on the overall issue of advancing renewable energy in American agriculture, and for their efforts in bringing this legislation to the floor today.

This resolution is as bold as it is straightforward. It simply states the United States expects our Nation's agricultural, forestry and working land to provide from renewable resources and sustainable resources not less than 25 percent of total U.S. energy consumption by 2025, while continuing to produce the world's safest, most abundant, most affordable food and feed. This goal is both exciting and achievable, and rural America stands ready to assume the challenge. Today's resolution compels us as a Nation to consider, to devise, and to implement a strategy for realizing this critical goal.

In recent years, we've taken important incremental steps in support of renewable energy. The most significant and positive example of this commitment was the passage of the Energy Policy Act of 2005, which contained the first-ever renewable fuel standard, long advocated by Chairman PETERSON and many others in this Chamber and in the Senate, a national mandate for the usage of renewable energy; and it has been a resounding success.

In 2004, we produced less than 3.5 billion gallons of ethanol in the United States. By the end of this calendar year, we'll have the capacity to produce more than 7 billion gallons of clean, renewable, domestically grown ethanol in this country.

This forward-looking and innovative policy has enabled the U.S. ethanol industry to more than double its production capacity in only 3 years; and the benefits to the economy, to consumers and to the environment have been tremendous; and as the ranking member noted, with the advancements in cellulosic ethanol, every region of the country will soon benefit as so many States have already done.

According to a recent study by LECG, a global expert services firm, the combination of spending for annual operations, ethanol transportation and capital spending for new plants under construction added \$41.9 billion of gross output to the American economy in 2006 alone, over \$1 billion of that in my home State of South Dakota. Even more important, much of this economic benefit has been realized by small communities in rural areas that have faced considerable economic challenges in recent decades.

Moreover, oil imports are the single largest component of our Nation's ex-

panding trade deficit. The production of nearly 5 billion gallons of ethanol in 2006 means that last year the U.S. imported 206 million fewer barrels of oil, valued at more than \$11 billion, than would have been the case without ethanol.

Finally, the environmental benefits of using renewable fuels abound. The use of 10 percent ethanol blends reduces greenhouse gas emissions by 12 to 19 percent compared with conventional gasoline. Ethanol reduces tailpipe carbon monoxide emissions by as much as 30 percent, and tailpipe fine particulate matter emissions by as much as 50 percent. In 2004 alone, ethanol use in the U.S. reduced CO₂-equivalent greenhouse gas emissions by more than 7 million tons, equal to removing the annual emissions of more than 1 million cars from the road.

That's why this resolution and this entire debate are so important. Congress is currently considering new energy policy legislation, providing us an opportunity to build on the policies of 2 years ago. In the coming weeks, I'm hopeful that we'll finalize this energy bill and send it to the President, but we must take this opportunity to be bold.

The final bill should certainly contain initiatives to promote energy conservation, but it must also require that we increase our domestic production of renewable energy, both in the electricity sector and in the transportation sector.

The success of our initial renewable energy mandate indicates the wisdom of that policy and demonstrates the need to be even bolder, even more forward looking and even more committed to achieving energy independence in this country.

This resolution today clearly outlines an appropriately aggressive goal for our country over the next 18 years and recognizes the role of American agriculture, and I look forward to working with my colleagues to making the aspirations a reality.

Mr. GOODLATTE. Madam Speaker, I have no further speakers at this time, and I yield back the balance of my time.

Mr. PETERSON of Minnesota. Madam Speaker, I just want to again thank my good friend Mr. GOODLATTE for his leadership on this issue and the rest of the members of our committee who have worked very hard. We've produced a farm bill that is going to do our part in getting this country off of energy independence.

I also want to thank our leadership, especially Speaker PELOSI for her leadership on this issue.

As I said, we have a tremendous opportunity in rural America and agriculture with this whole effort to get energy independent in this country, and this resolution will help us by establishing that goal.

In Minnesota, where I'm proud to be from, we have led the way. I was just at a grand opening on Friday of a new

plant that's turning turkey manure into electricity, and we have had mandates in Minnesota in ethanol and biodiesel, electricity, and it works.

We've had a tremendous economic development that's come about because of the renewable energy industry that we've developed in Minnesota. So we're proud on the Ag Committee of our work, and we urge our colleagues to join us in supporting H. Con. Res. 25.

Ms. JACKSON-LEE of Texas. Madam Speaker, I rise today in strong support of H. Con. Res. 25, expressing the sense of Congress that it is the goal of the United States that, not later than January 1, 2025, the agricultural, forestry, and working land of the United States should provide from renewable resources not less than 25 percent of the total energy consumed in the United States and continue to produce safe, abundant, and affordable food, feed, and fiber. I am proud to join over 70 of my colleagues in cosponsoring this important legislation. I would like to thank my distinguished colleague Congressman PETERSON for introducing this bill, as well for his leadership on this issue as the Chairman of the Agriculture Committee.

Madam Speaker, the issue of energy is not only a critical economic issue, it is an urgent national security issue which has reached crisis proportions. With gasoline prices at record levels, the American people are suffering for our dependence on foreign oil.

In addition to being from the energy capital of the world, for the past 12 years I have been the Chair of the Energy Braintrust of the Congressional Black Caucus. During this time, I have hosted a variety of energy braintrusts designed to bring in all of the relevant players ranging from environmentalists to producers of energy from a variety of sectors including coal, electric, natural gas, nuclear, oil, and alternative energy sources as well as energy producers from West Africa. My energy braintrusts were designed to be a call of action to all of the sectors who comprise the American and international energy industry, to the African American community, and to the nation as a whole.

Energy is the lifeblood of every economy, especially ours. Producing more of it leads to more good jobs, cheaper goods, lower fuel prices, and greater economic and national security. Bringing together thoughtful yet disparate voices to engage each other on the issue of energy independence has resulted in the beginning of a transformative dialectic which can ultimately result in reforming our energy industry to the extent that we as a nation achieve energy security and energy independence.

This Congress has demonstrated its commitment to taking our Nation in a new direction, toward energy security and away from dependence on foreign oil. Today, we are considering legislation, known as the "25 by '25 proposal," that expresses the sense of Congress that the goal of the U.S. is that America's farms, forests, and ranches provide 25% of the total energy consumed in America from renewable resources by 2025, while continuing to produce safe, abundant, and affordable food, feed, and fiber.

Madam Speaker, we live in a nation of extraordinary resources. As world oil prices continue to soar, now reaching a record \$86 per barrel, it is vital that harness our vast resources here at home. This legislation lays out

an ambitious goal, one which will require innovation and new thinking about national priorities. However, I believe that the goal of producing 25% of America's energy from renewable resources is well worth aiming for.

Renewable energy can be harnessed in every one of America's 50 States. It can come from resources including wind, solar, hydro-power, and biofuels, and it is currently the fastest growing energy sector. In particular, ethanol introduces the possibility that we can produce 25% of our projected gasoline use in 2025 from farm and forest resources, including many waste materials.

Both the House and the Senate have taken an important first step toward achieving this critical goal by passing comprehensive and bipartisan energy security measures. These initiatives have included critical proposals aimed at reducing our dependence on foreign oil; lowering energy costs through greater efficiency, cleaner energy, and smarter technology; creating new American jobs; and reducing global warming.

Madam Speaker, the legislation we are considering today has the support of a broad range of farm organizations, along with leaders from business, labor, conservation, environmental, and religious groups. It sets an ambitious but achievable goal, and will make important strides toward achieving energy independence. I strongly urge my colleagues to join me in supporting this legislation.

Mr. FORTENBERRY. Madam Speaker, I am pleased to be an original cosponsor of H. Con. Res. 25, which calls for 25 percent of America's energy supply to come from agriculture and rural based renewable energy sources by 2025. This 25x25 approach is a worthy goal.

Renewable energy holds wonderful promise for rural America, which can benefit exponentially from these trends. Production of renewable fuels and renewable energy meets multiple policy objectives. It decreases America's reliance on foreign sources of energy, creates new farm income, and fosters good stewardship of resources.

Clearly, Nebraska is a leader in America's renewable energy future. We will soon be the second leading producer of ethanol in the Nation, and we are home to cutting edge technologies that are producing renewable fuels and electricity from wastes at animal feeding operations. In addition, developments in biomass and wind energy are very encouraging. This kind of innovation will only continue to grow as more of America's energy comes from renewable sources.

Madam Speaker, America's renewable energy future is now. This is a very exciting opportunity for our farmers to lead the way for clean, environmentally-friendly energy production. I urge my colleagues to support H. Con. Res. 25.

Mr. PETERSON of Minnesota. Madam Speaker, I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Minnesota (Mr. PETERSON) that the House suspend the rules and agree to the concurrent resolution, H. Con. Res. 25.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the concurrent resolution was agreed to.

A motion to reconsider was laid on the table.

GENERAL LEAVE

Mr. PETERSON of Minnesota. Madam Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks on the concurrent resolution just considered.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Minnesota?

There was no objection.

LOUISIANA ARMED SERVICES VETERANS POST OFFICE

Mr. DAVIS of Illinois. Madam Speaker, I move to suspend the rules and pass the bill (H.R. 2089) to designate the facility of the United States Postal Service located at 701 Loyola Avenue in New Orleans, Louisiana, as the "Louisiana Armed Services Veterans Post Office".

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 2089

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

SECTION 1. LOUISIANA ARMED SERVICES VETERANS POST OFFICE.

(a) DESIGNATION.—The facility of the United States Postal Service located at 701 Loyola Avenue in New Orleans, Louisiana, shall be known and designated as the "Louisiana Armed Services Veterans Post Office".

(b) REFERENCES.—Any reference in a law, map, regulation, document, paper, or other record of the United States to the facility referred to in subsection (a) shall be deemed to be a reference to the "Louisiana Armed Services Veterans Post Office".

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Illinois (Mr. DAVIS) and the gentleman from North Carolina (Ms. FOXX) each will control 20 minutes.

The Chair recognizes the gentleman from Illinois.

□ 1515

GENERAL LEAVE

Mr. DAVIS of Illinois. Madam Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Illinois?

There was no objection.

Mr. DAVIS of Illinois. Madam Speaker, it is my pleasure to yield such time as he might consume to the sponsor of this legislation, Representative JEFFERSON from Louisiana.

Mr. JEFFERSON. Madam Speaker, I rise today as the sponsor of H.R. 2089 to rename the main post office in New Orleans from the New Orleans Main Office Window Service to the Louisiana Armed Services Veterans Memorial Post Office.

I would like to thank Chairman WAXMAN for his leadership in bringing this bill to the floor today as well as my colleague Mr. DAVIS of Illinois, as well

as fellow members of the Louisiana congressional delegation who join me as cosponsor of this measure.

As we approach the commemoration of Veterans Day, it is important to note that the State of Louisiana has made many contributions to each branch of our armed services and, by extension, to the defense of this Nation. My State of Louisiana is home to many proud armed service veterans dating from World War I to the present military engagement in Iraq. I am proud to say that many of my fellow Louisianans have volunteered and sacrificed as soldiers and as families of soldiers in the defense of this great Nation, and it is only appropriate that we memorialize them in this significant way. Louisiana is home to well over 370,000 uniformed veterans. This includes nearly 120,000 who served in World War II, 47,000 in the Korean War, 115,000 in the Vietnam War, and 80,000 in Desert Storm, the first Gulf War.

However, simply citing statistics does not give a complete picture. It doesn't give a complete picture of the sacrifices nor contributions made on behalf of the soldiers nor does it detail the historical relationship of Louisiana and the armed services branches of our Nation. It could be easily argued that the very battle that propelled America onto the world stage as a political and military power was fought on January 8, 1815, just below New Orleans, the Battle of New Orleans. Louisiana military posts were key supply points for the Mexican War of 1848. The Nation's first African American woman to earn her star as a general in the U.S. Army was Sherian Grace Cadonia, who grew up in Marksville, Louisiana, and graduated from my alma mater at Southern University in Baton Rouge.

Louisiana is also home to three major military installations, Barksdale Air Force Base in Bossier City, the Army's Fort Polk Joint Readiness Training Center near Leesville, and in my district, the Belle Chase naval facility across the Mississippi River from New Orleans. Each installation is an integral part of its respective community. Each also employs many local residents and has a profound impact on the economy of our State.

I would be remiss, Madam Speaker, were I not to mention the Louisiana National Guard, which calls New Orleans home at Jackson Barracks. The National Guard has made significant contributions within the State as well as abroad. During the first Gulf War, Louisiana had the highest number of guardsmen serving per capita than any other State in the Nation. However, Louisiana's contributions to the armed services does not come without cost. During the current war in Iraq, Louisiana lost more than 100 of its servicemen and women and over 500 have been wounded; yet this is not the only area in which our armed servicemen and women have paid a high price. Unfortunately, some of our veterans have had to fight two wars, one abroad and then

one back at home. I am very pleased this Congress has recognized that to some great measure and has done much more this year for our veterans than ever before. But in my district, where the Veterans Administration Hospital remains closed, this notion is particularly poignant of two wars. The closure of this hospital has left many veterans in my district with no choice but to travel long distances either to Shreveport, Louisiana, or Jackson, Mississippi, for hospital care. Though the Veterans Administration has recently announced plans to rebuild a bigger and better hospital in New Orleans, and I applaud the decision for it is the right one, those doors will still not open for a few years, leaving many veterans with few options. The VA has also suffered through a backlog of 6,000 Veterans Administration claims in Louisiana alone right now. The problem is nationwide and it is growing.

So today, with Veterans Day not far off, we honor and recognize our veterans in Louisiana who have paid a high price for our collective freedom. We do this by memorializing them in this significant way and memorializing their sacrifices forever by renaming the Main Post Office Building in New Orleans the Louisiana Armed Services Veterans Memorial Post Office. I urge passage of this bill.

Ms. FOXX. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I rise today to urge passage of H.R. 2089, to designate the U.S. Postal Service location at 701 Loyola Avenue in New Orleans as the Louisiana Armed Services Veterans Post Office.

From the Battle of New Orleans in the War of 1812, to the Chinese Bandits who laid the groundwork for U.S. air superiority in the Asian theater in World War II, to LTG Russell Honore's leadership of the military response to Hurricane Katrina, Louisianans have been at the forefront of defending this country from the time of its founding to this very day.

Louisiana's fighters have always been known for being a little tougher, a little wilder, a little crazier, if you will, than their counterparts from elsewhere. It made them perfect for some missions, but not so perfect for others. But the end result always has been that they have been quick in the Bayou State to take up arms whenever their country needed them.

Consider Claire Chennault. In 1937, Chennault, a captain in the U.S. Army Air Corps, progenitor of the Air Force, resigned his commission to go to China on behalf of Madam Chaing Kai-shek to help the Chinese build an air force to fend off the Japanese. He did not leave until World War II ended in 1945. In the interim, he helped organize an air force that featured strategically located airfields and an air raid warning system built from scratch that protected all of what was then known as Free China. Without his work, American air power could not have functioned in China.

Later, Chennault was to describe the air raid warning system as a vast spider net of people, radios, telephones, and telegraph lines that covered all of Free China accessible to enemy aircraft. In addition to continuous intelligence of enemy attacks, the net served to locate and guide lost friendly planes, direct aid to friendly pilots who had crashed or bailed out, and helped guide our technical intelligence experts to wrecks or crashed enemy aircraft.

In other words, something out of nothing. The same as the muskets Louisianans used to fend off the British in New Orleans, and General Honore used to help rebuild Louisiana after Katrina. It is a tradition well worth honoring, and this measure does just that.

Madam Speaker, I reserve the balance of my time.

Mr. DAVIS of Illinois. Madam Speaker, I yield myself such time as I might consume.

Madam Speaker, as a Member of the House Committee on Oversight and Government Reform, I am pleased to join my colleague in the consideration of H.R. 2089, which names a postal facility in New Orleans, Louisiana, after the Louisiana armed services veterans.

H.R. 2089 which was introduced by Representative WILLIAM JEFFERSON on May 1, 2007, was reported from the Oversight Committee on September 20, 2007, by voice vote. This measure has the support of the entire Louisiana congressional delegation.

Madam Speaker, the Louisiana armed services veterans were recognized for their significant contributions to our country early in the 19th and 20th centuries. During the War of 1812, Louisiana's veteran troops, which included French, Spanish, African, Anglo, Creole, and Native American people, under General Andrew Jackson, decisively defeated the British forces on January 8, 1815. This battle forced the British to recognize the United States' claim to Louisiana and helped establish America as a political and military power.

In the 20th century, the famous Louisiana maneuvers held at Fort Polk, Louisiana, in 1940 tested the mettle of future World War II Army Generals Dwight D. Eisenhower and George Patton and the soldiers who served under their leadership. President Eisenhower referred to Louisianan Andrew Jackson Higgins as "the man who won the war." In New Orleans, Higgins designed and built amphibious landing craft that made possible the invasions of enemy-held Pacific Islands and the coast of France D-Day invasion.

Rural southeast Louisiana was native soil for two Marine Corps commanders, General John Archer Lejeune and General Robert Barrow. The Nation's first black woman to earn her stars as a U.S. Army General, Sherian Grace Cadoria, grew up in Marksville, Louisiana.

The Louisiana veterans for centuries have served and defended our country

with exemplary valor and honor. And so, Madam Speaker, I commend my colleague, Representative WILLIAM JEFFERSON, for introducing this legislation and urge its passage.

I reserve the balance of my time.

Ms. FOXX. Madam Speaker, I yield back the balance of my time.

Mr. DAVIS of Illinois. Madam Speaker, I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Illinois (Mr. DAVIS) that the House suspend the rules and pass the bill, H.R. 2089.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the ayes have it.

Mr. DAVIS of Illinois. Madam Speaker, on that I demand the yeas and nays. The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX and the Chair's prior announcement, further proceedings on this motion will be postponed.

NATE DETAMPLE POST OFFICE BUILDING

Mr. DAVIS of Illinois. Madam Speaker, I move to suspend the rules and pass the bill (H.R. 3297) to designate the facility of the United States Postal Service located at 950 West Trenton Avenue in Morrisville, Pennsylvania, as the "Nate DeTample Post Office Building".

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 3297

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

SECTION 1. NATE DETAMPLE POST OFFICE BUILDING.

(a) DESIGNATION.—The facility of the United States Postal Service located at 950 West Trenton Avenue in Morrisville, Pennsylvania, shall be known and designated as the "Nate DeTample Post Office Building".

(b) REFERENCES.—Any reference in a law, map, regulation, document, paper, or other record of the United States to the facility referred to in subsection (a) shall be deemed to be a reference to the "Nate DeTample Post Office Building".

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Illinois (Mr. DAVIS) and the gentlewoman from North Carolina (Ms. FOXX) each will control 20 minutes.

The Chair recognizes the gentleman from Illinois.

GENERAL LEAVE

Mr. DAVIS of Illinois. Madam Speaker, I ask unanimous consent that Members may have 5 legislative days in which to revise and extend their remarks.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Illinois?

There was no objection.

Mr. DAVIS of Illinois. Madam Speaker, it is my pleasure to yield such time as he might consume to the author of this resolution, the sponsor of this legislation, Representative PATRICK MURPHY from Pennsylvania.

Mr. PATRICK J. MURPHY of Pennsylvania. Madam Speaker, I thank the gentleman from Illinois.

I rise today with pride to honor one of our Nation's finest sons. Nathaniel DeTample, Nate to his friends and family, Baby Boy to his National Guard unit, died in Iraq on August 9, 2005. He was 19 years old.

Nate was an Eagle Scout, an Eagles fan, a standout wrestler at Pennsbury High School, and a friend to all who knew him. Today, we pay tribute.

Madam Speaker, the legislation before us today will name the post office building in Morrisville, Bucks County, Pennsylvania, the Nate DeTample Post Office Building.

I am proud that this will be the first Pennsylvania post office named after an Iraq war veteran. His name will appear for all to see at 950 West Trenton Avenue, a sign of the spirit we honor.

Madam Speaker, today we give thanks to Nate and to his family for their service to our Nation. Nate joined the Pennsylvania National Guard to serve. He planned to be a police officer like his dad, but he never got that chance. He was always first in line to wrestling practice and always had a positive attitude. Bucks County Police Chief Ken Coluzzi said Nate was a nice boy and a fine young man who was going to be outstanding. It seems that is who is over there, overseas. There are a lot of outstanding young men and women who just want to do the right thing for their country, outstanding young heroes who put their lives on the line every single day.

□ 1530

Nate served in the Pennsylvania National Guard's Alpha Company, 1st Battalion, 111 Infantry, a unit that proudly traces its roots back to the founding of our Nation and the Minutemen of the Revolutionary War, a rich history that Nate honored with his unforgettable spirit.

Madam Speaker, his friend said in tribute that Nate was one of the nicest guys ever. You never saw him down. You didn't have to meet Nate to know what kind of man, what kind of soldier he was.

When it came time for him to be laid to rest, scores of people lined the streets to say goodbye and to give thanks, a true testament to his spirit, his sacrifice, and the impact he had on the lives that he touched.

Madam Speaker, Nate's mom and dad, Kim and Glenn, asked at Nate's funeral that all of us pray for Nate's fellow soldiers and their families. Today, before this great body, with great pride, I repeat their request, and ask that we make it our mission to honor the fallen and stand up for those who are still fighting.

With his service, Nate DeTample showed us true energy, faith, and devotion. His memory will light our world.

In closing, I want to share how Nate signed one of his letters home from Iraq: "Rock Steady, Nate."

Madam Speaker, I hope my colleagues join me in honoring one of those rocks of our community, Nate DeTample. Rock steady.

Ms. FOXX. Madam Speaker, I yield myself as much time as I may consume.

It is an honor for me to speak today about an American hero who showed great bravery and loyalty to his country well beyond his 19 years.

On August 9, 2005, a roadside bomb took the life of Nate DeTample, extinguishing his hopes and dreams, an ending to what, by all accounts, was an exemplary life.

During his high school years, Nate DeTample was remembered as an impressive young man and an extremely nice guy.

His personality was such that he always reached out to others with a handshake and asked how they were doing. He showed great leadership and ability as a wrestler for Pennsbury High School. One of his coaches remembered him as a hard worker and always being the first to practice.

It was Nate's dream to become a police officer, much like his father, Glenn, a detective for the Lower Makefield Police Department. With this dream in mind, Nate joined the National Guard after he graduated and headed off to college at Shippensburg University, where he majored in criminal justice. He was, however, called to serve his country before he could complete his first year of study. Some might have complained, but Nate believed in the mission and served to the best of his abilities.

Upon learning of Nate's death, the flag at the Lower Makefield Police Department was flown at half mast. This was a fitting tribute for someone who paid the ultimate sacrifice for his country and his community. It is also a fitting tribute that we give the post office on West Trenton Avenue in Morrisville, Pennsylvania, his name so that we may not forget his courage, his bravery and the price he paid for us.

Madam Speaker, I ask that my colleagues join me in support of this fitting tribute.

I reserve the balance of my time.

Mr. DAVIS of Illinois. Madam Speaker, I yield myself such time as I might consume.

Madam Speaker, as a member of the House Committee on Oversight and Government Reform, I'm pleased to join my colleagues in the consideration of H.R. 3297, which names the postal facility in Morrisville, Pennsylvania, after Nate DeTample.

H.R. 3297, which was introduced by Representative PATRICK MURPHY on August 1, 2007, was reported from the Oversight Committee on September 20, 2007, by voice vote. This measure has the support of the entire Pennsylvania congressional delegation.

Madam Speaker, Private First Class Nathaniel E. DeTample was killed on August 9, 2005, in an attack by small arms fire in Beiji, Iraq. The attack oc-

curred while he was investigating a rocket-propelled grenade incident. He was assigned to the 1st Battalion, 111 Infantry Regiment, Pennsylvania Army National Guard in Philadelphia.

Private DeTample was a wrestler, an Eagle Scout, and a criminal justice major at Shippensburg University. He was deployed to Iraq in March 2005 for the purpose of performing stability and support operations in the Beiji area north of Baghdad. He served his country with honor and distinction.

And so, Madam Speaker, I commend my colleague, Representative MURPHY, for introducing this legislation, and urge its swift passage.

Madam Speaker, I reserve the balance of my time.

Ms. FOXX. Madam Speaker, I urge all Members to support the passage of H.R. 3297, and I yield back the balance of my time.

Mr. DAVIS of Illinois. Madam Speaker, I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Illinois (Mr. DAVIS) that the House suspend the rules and pass the bill, H.R. 3297.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill was passed.

A motion to reconsider was laid on the table.

WALLACE S. HARTSFIELD POST OFFICE BUILDING

Mr. DAVIS of Illinois. Madam Speaker, I move to suspend the rules and pass the bill (H.R. 3572) to designate the facility of the United States Postal Service located at 4320 Blue Parkway in Kansas City, Missouri, as the "Wallace S. Hartsfield Post Office Building".

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 3572

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

SECTION 1. WALLACE S. HARTSFIELD POST OFFICE BUILDING.

(a) DESIGNATION.—The facility of the United States Postal Service located at 4320 Blue Parkway in Kansas City, Missouri, shall be known and designated as the "Wallace S. Hartsfield Post Office Building".

(b) REFERENCES.—Any reference in a law, map, regulation, document, paper, or other record of the United States to the facility referred to in subsection (a) shall be deemed to be a reference to the "Wallace S. Hartsfield Post Office Building".

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Illinois (Mr. DAVIS) and the gentleman from North Carolina (Ms. FOXX) each will control 20 minutes.

The Chair recognizes the gentleman from Illinois.

GENERAL LEAVE

Mr. DAVIS of Illinois. Madam Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Illinois?

There was no objection.

Mr. DAVIS of Illinois. Madam Speaker, it is my pleasure to yield such time as he might consume to the sponsor of this legislation, Representative EMANUEL CLEAVER of Missouri.

Mr. CLEAVER. Madam Speaker, I very proudly stand here today to recommend the Reverend Dr. Wallace S. Hartsfield, a minister in the Fifth Congressional District, which I very proudly serve, be given the honor of having a postal facility named in his honor at 4320 Blue Parkway in Kansas City, Missouri. All nine members of the Missouri delegation have signed on to this bill, and they signed on for one real reason. It is this:

Rev. Hartsfield is an American story. He was born in Atlanta, Georgia, on November 12 in 1929. He was raised by his mother. He was the only child and yet she worked and struggled and pushed him. He eventually graduated from high school and then served a 3-year tour of duty with the United States Army. He returned to this country and attended Clark College, which is now called Clark Atlanta University. He received a bachelor's degree, and then he went on to receive a Master's of Divinity at Gammon Theological Seminary, which is known as the Interdenominational Theological Seminary today. He's received a number of honorary doctorate degrees, and he is recognized in our community as a man who is always going to be where something good is happening.

He has been a strong worker in the field of diversity. He is a man who has been able to bring the clergy together from across racial and even religious lines. He's known as the dean of preachers in our community, and I dubbed him the "Godfather of Preachers" because of the respect he receives from members of the clergy. Anytime anything in our community is going on that is productive and meaningful, you can expect to see Rev. Wallace S. Hartsfield present.

This postal designation is the first I've ever introduced, and one of the reasons that I feel strongly about this is the post office delivers mail to everyone, and if you look at the life and work of the Reverend Wallace S. Hartsfield, that is exactly what he's done. He has delivered ministry, friendship and civic concern to everyone in our community, and so a post office, I think, is very, very appropriate to bear his name.

And so, Madam Speaker, it would be my hope that this body would allow our community to celebrate fully his retirement at a November 9 banquet, during which time I would like to proudly announce that the United States Congress has named a post office in his honor.

Ms. FOXX. Madam Speaker, I yield myself as much time as I may consume.

I rise today to pay tribute to Rev. Wallace S. Hartsfield, a family man, community activist, and man of God.

Rev. Hartsfield was born in Atlanta, Georgia, on November 12, 1929. After a 3-year tour of duty with the United States Army, he went on to receive a bachelor of arts degree from Clark College, now Clark Atlanta University. Three years later, in 1957, he received a Master of Divinity degree.

The list of honorary degrees Rev. Hartsfield has earned is long and distinguished. They include a Doctor of Divinity from both Western Baptist Bible College in Kansas City, Missouri, and Virginia Seminary and College of Lynchburg, Virginia.

While his list of academic accomplishments is impressive, the work he has done since the end of his formal education is even more so. His first pastorate was in Pickens, South Carolina, and he served in the States of Kansas, Florida, and Georgia before settling into a position at the Metropolitan Missionary Baptist Church located in Kansas City, Missouri, a place he has preached for over 40 years.

Rev. Hartsfield will retire on January 1, 2008, as senior pastor. During his long service to the church, he became affectionately known as the dean of Kansas City Ministers; and the cosponsor of this bill, Mr. CLEAVER, has nicknamed him the Godfather of Preachers because of the knowledge he possesses and his impressive oratory skills. He has become a mentor not only for those in the local ministry, but for community leaders as well.

His steadfast dedication to Kansas City and the surrounding area have helped solidify the community and shape it into what it is today. However, his leadership and influence have extended well beyond the boundaries of his duty as a minister. He has fought to promote, protect, and ensure civil liberties for all races, not only at home but across the Nation. And he served as president of the greater Kansas City chapter of Operation PUSH, an organization dedicated to the promotion of religious and social development and human rights.

He is a former chairman of the Congress of National Black Churches that represents over 65,000 churches. He has also served in many positions within the National Baptist Convention of America.

The reverend was appointed by the Governor to serve as commissioner on the Missouri Highway Commission and was at the forefront of efforts to construct the Metropolitan Homes, a 60-unit low-income housing development.

Despite all of his work and the demands for his time and attention, they did not detract from his love for his family. The reverend just celebrated his 50th anniversary with his wife, Matilda Hopkins. They are the proud parents of four children.

Madam Speaker, I ask that my colleagues join me, Mr. CLEAVER, and all of the members of the Missouri delega-

tion in congratulating Rev. Hartsfield on his retirement, wish him well in his new endeavors, and join us in supporting the naming of the post office facility on Blue Parkway in Kansas City in his honor.

Madam Speaker, I reserve the balance of my time.

□ 1545

Mr. DAVIS of Illinois. Madam Speaker, I yield myself such time as I may consume.

As a member of the House Committee on Oversight and Government Reform, I am pleased to join my colleague in the consideration of H.R. 3572, which names a postal facility in Kansas City, Missouri, after Wallace S. Hartsfield, Sr.

H.R. 3572, which was introduced by Representative EMANUEL CLEAVER on September 18, 2007, was reported from the Oversight Committee on October 4, 2007, by voice vote. This measure has the support of the entire Missouri congressional delegation.

Madam Speaker, Rev. Dr. Wallace S. Hartsfield, Sr.'s dedication and service to the people of Kansas City goes back many years. He is a committed community activist, civil servant, and has served as the senior pastor of the Metropolitan Missionary Baptist Church since 1972. He is the vice president-at-large of the Economic Development Commission of the National Baptist Convention of America, Incorporated. He is a former chairman of the Congress of National Black Churches and past president of the General Baptist State Convention of Missouri, Kansas, and Nebraska. He has served as an adjunct professor and guest lecturer at numerous colleges and universities.

Rev. Hartsfield is a well-respected man of faith, and on January 1, 2008, he will retire as senior pastor of the Metropolitan Missionary Baptist Church.

So, Madam Speaker, I commend my colleague, the Reverend Representative EMANUEL CLEAVER, for introducing this legislation. I enthusiastically support this legislation and urge its passage.

Madam Speaker, I reserve the balance of my time.

Ms. FOXX. Madam Speaker, I urge all Members to support the passage of H.R. 3572.

Madam Speaker, I yield back the balance of my time.

Mr. DAVIS of Illinois. Madam Speaker, I yield back the balance of my time.

The SPEAKER pro tempore (Mrs. CAPPS). The question is on the motion offered by the gentleman from Illinois (Mr. DAVIS) that the House suspend the rules and pass the bill, H.R. 3572.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill was passed.

A motion to reconsider was laid on the table.

RECESS

The SPEAKER pro tempore. Pursuant to clause 12(a) of rule I, the Chair

declares the House in recess until 4 p.m. today.

Accordingly (at 3 o'clock and 47 minutes p.m.), the House stood in recess until 4 p.m. today.

□ 1600

AFTER RECESS

The recess having expired, the House was called to order by the Speaker pro tempore (Ms. BERKLEY) at 4 p.m.

MELANIE BLOCKER-STOKES POSTPARTUM DEPRESSION RESEARCH AND CARE ACT

Ms. BALDWIN. Madam Speaker, I move to suspend the rules and pass the bill (H.R. 20) to provide for research on, and services for individuals with, postpartum depression and psychosis, as amended.

The Clerk read the title of the bill. The text of the bill is as follows:

H.R. 20

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 "Melanie Blocker-Stokes Postpartum Depression Research and Care Act".

SEC. 2. FINDINGS.

The Congress finds as follows:

(1) Postpartum depression is a devastating mood disorder which strikes many women during and after pregnancy.

(2) Postpartum mood changes are common and can be broken into three subgroups: "baby blues", which is an extremely common and the less severe form of postpartum depression; postpartum mood and anxiety disorders, which are more severe than baby blues and can occur during pregnancy and anytime within the first year of the infant's birth; and postpartum psychosis, which is the most extreme form of postpartum depression and can occur during pregnancy and up to 12 months after delivery.

(3) "Baby blues" is characterized by mood swings, feelings of being overwhelmed, tearfulness, irritability, poor sleep, mood changes, and a sense of vulnerability.

(4) The symptoms of postpartum mood and anxiety disorders are the worsening and the continuation of the baby blues beyond the first days or weeks after delivery.

(5) The symptoms of postpartum psychosis include losing touch with reality, distorted thinking, delusions, auditory hallucinations, paranoia, hyperactivity, and rapid speech or mania.

(6) Each year over 400,000 women suffer from postpartum mood changes, with baby blues afflicting up to 80 percent of new mothers; postpartum mood and anxiety disorders impairing around 10 to 20 percent of new mothers; and postpartum psychosis striking 1 in 1,000 new mothers.

(7) Postpartum depression is a treatable disorder if promptly diagnosed by a trained provider and attended to with a personalized regimen of care including social support, therapy, medication, and when necessary hospitalization.

(8) All too often postpartum depression goes undiagnosed or untreated due to the social stigma surrounding depression and mental illness, the myth of motherhood, the new mother's inability to self-diagnose her condition, the new mother's shame or embarrassment over discussing her depression so near to the birth of her child, the lack of understanding in society

and the medical community of the complexity of postpartum depression, and economic pressures placed on hospitals and providers.

(9) Untreated, postpartum depression can lead to further depression, substance abuse, loss of employment, divorce and further social alienation, self-destructive behavior, or even suicide.

(10) Untreated, postpartum depression impacts society through its effect on the infant's physical and psychological development, child abuse, neglect, or death of the infant or other siblings, and the disruption of the family.

TITLE I—RESEARCH ON POSTPARTUM DEPRESSION AND PSYCHOSIS

SEC. 101. EXPANSION AND INTENSIFICATION OF ACTIVITIES.

(a) *IN GENERAL.*—The Secretary of Health and Human Services, acting through the Director of the National Institutes of Health and the Director of the National Institute of Mental Health (in this title referred to as the "Institute"), is encouraged to continue aggressive work on postpartum depression and postpartum psychosis.

(b) *COORDINATION WITH OTHER INSTITUTES.*—The Director of the Institute should continue to coordinate activities of the Director under subsection (a) with similar activities conducted by the other national research institutes and agencies of the National Institutes of Health to the extent that such Institutes and agencies have responsibilities that are related to postpartum conditions.

(c) *PROGRAMS FOR POSTPARTUM CONDITIONS.*—In carrying out subsection (a), the Director of the Institute is encouraged to continue research to expand the understanding of the causes of, and to find a cure for, postpartum conditions. Activities under such subsection shall include conducting and supporting the following:

(1) Basic research concerning the etiology and causes of the conditions.

(2) Epidemiological studies to address the frequency and natural history of the conditions and the differences among racial and ethnic groups with respect to the conditions.

(3) The development of improved screening and diagnostic techniques.

(4) Clinical research for the development and evaluation of new treatments, including new biological agents.

(5) Information and education programs for health care professionals and the public.

SEC. 102. NATIONAL PUBLIC AWARENESS CAMPAIGN.

(a) *IN GENERAL.*—The Director of the National Institutes of Health and the Administrator of the Health Resources and Services Administration are encouraged to carry out a coordinated national campaign to increase the awareness and knowledge of postpartum depression and postpartum psychosis.

(b) *PUBLIC SERVICE ANNOUNCEMENTS.*—Activities under the national campaign under subsection (a) may include public service announcements through television, radio, and other means.

SEC. 103. BIENNIAL REPORTING.

Section 403(a)(5) of the Public Health Service Act (42 U.S.C. 283(a)(5)) is amended—

(1) by redesignating subparagraph (L) as subparagraph (M); and

(2) by inserting after subparagraph (K) the following:

"(L) Depression."

SEC. 104. LONGITUDINAL STUDY OF RELATIVE MENTAL HEALTH CONSEQUENCES FOR WOMEN OF RESOLVING A PREGNANCY.

(a) *SENSE OF CONGRESS.*—It is the sense of Congress that the Director of the Institute may conduct a nationally representative longitudinal study (during the period of fiscal years 2008 through 2018) of the relative mental health consequences for women of resolving a pregnancy (intended and unintended) in various ways, in-

cluding carrying the pregnancy to term and parenting the child, carrying the pregnancy to term and placing the child for adoption, miscarriage, and having an abortion. This study may assess the incidence, timing, magnitude, and duration of the immediate and long-term mental health consequences (positive or negative) of these pregnancy outcomes.

(b) *REPORT.*—Beginning not later than 3 years after the date of the enactment of this Act, and periodically thereafter for the duration of the study under subsection (a), the Director of the Institute should prepare and submit to the Congress reports on the findings of the study.

TITLE II—DELIVERY OF SERVICES REGARDING POSTPARTUM DEPRESSION AND PSYCHOSIS

SEC. 201. ESTABLISHMENT OF PROGRAM OF GRANTS.

(a) *IN GENERAL.*—The Secretary of Health and Human Services (in this title referred to as the "Secretary") should in accordance with this title make grants to provide for projects for the establishment, operation, and coordination of effective and cost-efficient systems for the delivery of essential services to individuals with postpartum depression or postpartum psychosis (referred to in this section as a "postpartum condition") and their families.

(b) *RECIPIENTS OF GRANTS.*—A grant under subsection (a) may be made to an entity only if the entity is a public or nonprofit private entity, which may include a State or local government; a public or nonprofit private hospital, community-based organization, hospice, ambulatory care facility, community health center, migrant health center, or homeless health center; or any other appropriate public or nonprofit private entity.

(c) *CERTAIN ACTIVITIES.*—To the extent practicable and appropriate, the Secretary shall ensure that projects under subsection (a) provide services for the diagnosis and management of postpartum conditions. Activities that the Secretary may authorize for such projects may also include the following:

(1) Delivering or enhancing outpatient and home-based health and support services, including case management, screening, and comprehensive treatment services for individuals with or at risk for postpartum conditions; and delivering or enhancing support services for their families.

(2) Delivering or enhancing inpatient care management services that ensure the well-being of the mother and family and the future development of the infant.

(3) Improving the quality, availability, and organization of health care and support services (including transportation services, attendant care, homemaker services, day or respite care, and providing counseling on financial assistance and insurance) for individuals with postpartum conditions and support services for their families.

(d) *INTEGRATION WITH OTHER PROGRAMS.*—To the extent practicable and appropriate, the Secretary should integrate the program under this title with other grant programs carried out by the Secretary, including the program under section 330 of the Public Health Service Act.

SEC. 202. CERTAIN REQUIREMENTS.

A grant may be made under section 201 only if the applicant involved makes the following agreements:

(1) Not more than 5 percent of the grant will be used for administration, accounting, reporting, and program oversight functions.

(2) The grant will be used to supplement and not supplant funds from other sources related to the treatment of postpartum conditions.

(3) The applicant will abide by any limitations deemed appropriate by the Secretary on any charges to individuals receiving services pursuant to the grant. As deemed appropriate by the Secretary, such limitations on charges may vary based on the financial circumstances of the individual receiving services.

(4) The grant will not be expended to make payment for services authorized under section 201(a) to the extent that payment has been made, or can reasonably be expected to be made, with respect to such services—

(A) under any State compensation program, under an insurance policy, or under any Federal or State health benefits program; or

(B) by an entity that provides health services on a prepaid basis.

(5) The applicant will, at each site at which the applicant provides services under section 201(a), post a conspicuous notice informing individuals who receive the services of any Federal policies that apply to the applicant with respect to the imposition of charges on such individuals.

SEC. 203. TECHNICAL ASSISTANCE.

The Secretary may provide technical assistance to assist entities in complying with the requirements of this title in order to make such entities eligible to receive grants under section 201.

TITLE III—GENERAL PROVISIONS

SEC. 301. AUTHORIZATION OF APPROPRIATIONS.

To carry out this Act and the amendments made by this Act, there are authorized to be appropriated—

(1) \$3,000,000 for fiscal year 2008; and

(2) such sums as may be necessary for fiscal years 2009 and 2010.

The SPEAKER pro tempore. Pursuant to the rule, the gentlewoman from Wisconsin (Ms. BALDWIN) and the gentleman from New York (Mr. FOSSELLA) each will control 20 minutes.

The Chair recognizes the gentlewoman from Wisconsin.

GENERAL LEAVE

Ms. BALDWIN. Madam Speaker, I ask unanimous consent that all Members have 5 legislative days to revise and extend their remarks and include extraneous material on the bill under consideration.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from Wisconsin?

There was no objection.

Ms. BALDWIN. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I rise in strong support of H.R. 20, the Melanie Blocker-Stokes Postpartum Depression Research and Care Act of 2007.

The birth of a child can be a joyous and exciting time, but following childbirth, some women may experience postpartum disorders that can adversely affect a woman's mental health. According to the American College of Obstetricians and Gynecologists, about 10 percent of new moms experience postpartum depression, a form of depression that can develop within the first 6 months after giving birth.

For women with postpartum depression, feelings such as sadness, anxiety, and restlessness can be so strong that they interfere with daily tasks. Rarely, a more extreme form of depression known as postpartum psychosis can develop. Postpartum depression and psychosis can have an adverse effect on a woman's mental health and impair their ability to bond with their newborn child.

The legislation before us today will go a long way towards helping to increase awareness of postpartum depres-

sion and psychosis. H.R. 20 encourages the Secretary of Health and Human Services and the Director of the National Institutes of Health to expand and intensify research on postpartum depression and to conduct and support research in an effort to find a cure for postpartum depression and psychosis.

Furthermore, this legislation encourages the NIH to carry out a national campaign to increase awareness of postpartum depression, and it directs Health and Human Services to make grants to help with coordinating the effective delivery of essential services to individuals with postpartum depression, as well as their families.

I would like to extend a special thank you to our Commerce, Trade and Consumer Protection Subcommittee chairman, Mr. RUSH, who has championed this bill's cause. His commitment to ensuring that women who suffer from postpartum depression better understand their condition and have access to the resources that they need has been unwavering. I commend him for his hard work, and I urge all of my colleagues to join me in supporting this life-saving legislation.

Madam Speaker, I reserve the balance of my time.

Mr. FOSSELLA. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I rise today in support of H.R. 20, the Melanie Blocker-Stokes Postpartum Depression Research and Care Act, and join my colleagues in commending Mr. RUSH for bringing the bill to the floor.

As has been mentioned, the bill highlights the need to increase awareness of postpartum depression and expand the knowledge of its terrible side effects.

It's important to note that as many as 80 percent of women experience some mood disturbances after pregnancy, and for most women the symptoms are mild and go away on their own; but 10 to 20 percent of women develop a more disabling form of mood disorder called postpartum depression.

This legislation encourages the continuation of research being done by Federal agencies as to the cause of postpartum depression and how it can be better treated. And with my colleagues, I stand in support of the legislation and hope my colleagues will join me.

Madam Speaker, I reserve the balance of my time.

Ms. BALDWIN. Madam Speaker, I am pleased to yield 7 minutes to the gentleman from Illinois, the bill's author, Mr. RUSH.

Mr. RUSH. Madam Speaker, I want to thank the gentlelady from Wisconsin for yielding me this time on this very important matter.

Madam Speaker, I rise today in strong support of H.R. 20, the Melanie Blocker-Stokes Postpartum Depression Research and Care Act.

I would like to thank Chairman DINGELL; Ranking Member BARTON; my

colleague, Congressman PITTS; and the members of the Energy and Commerce Committee who unanimously supported this legislation's passage out of committee.

Madam Speaker, after 6 long, arduous years, today marks an important step in the protracted journey for Congress to recognize postpartum depression as a national priority. I am so proud that nearly 130 bipartisan cosponsors have united with me today to say no longer will postpartum depression be dismissed as mere "baby blues."

By passing H.R. 20, Congress will finally put significant money and attention into research, screening, treatment, and education for mothers suffering from this disease.

Sadly, Madam Speaker, I was moved to author H.R. 20 after watching the news accounts of the missing Melanie Stokes, a new mother, a successful businesswoman, and my constituent. Despite her family's valiant interventions, Melanie's psychosis was so severe that she slipped away from her family and from her friends and tragically ended her life.

Afterwards, I reached out to Melanie's mother, Carol Blocker, and was told of her daughter's diagnosis and suicide that occurred as a result of postpartum psychosis. And sometime later, Madam Speaker, I talked with Dr. Nada Stotland of the American Psychiatric Association, who is another constituent of mine, and she detailed the value in additional research. And she discussed the underreporting and mixed diagnosis of postpartum depression and psychosis in our country.

There is no denying, the needs for resources to combat postpartum depression grow more and more and more each year. Here are the facts, Madam Speaker:

Research indicates that some form of postpartum depression affects approximately one in 1,000 new mothers, resulting in up to 800,000 cases annually. Of the new postpartum cases this year, less than 15 percent of mothers will receive treatment. However, with treatment, over 90 percent of these mothers could overcome their depression. And approximately every 50 seconds, a new mother will begin struggling with the affects of mental illness.

Madam Speaker, these facts are profound. And in the words of Carol Blocker, "Hundreds of thousands of women who have suffered from postpartum depression and psychosis are still waiting for this Congress to act 6 years after the legislation has been introduced."

Madam Speaker, I want to thank you for this day, because today Ms. Blocker and hundreds of thousands of mothers will not have to wait any longer for Congress to act.

My legislation, to sum it up, would encourage the Secretary of Health and Human Services to further research at the National Institutes of Health on postpartum depression.

My legislation would also finance a national public awareness campaign to bring this illness out of the dark and shed new light on how to screen and treat mothers. It would also add depression to the biennial report the National Institutes of Health must submit to the Congress.

Lastly, my bill will finance much-needed grants to public and nonprofit organizations to establish and operate programs that provide screening, treatment and various health care and support services to individuals with postpartum depression or postpartum psychosis.

Moreover, Madam Speaker, this bill is an affordable approach to research and services. The CBO estimates that H.R. 20 costs less than \$500,000 per year, and \$18 million over 5 years.

This is good policy, Madam Speaker. This is good politics. And this is a good public health bill.

I want to take a moment, Madam Speaker, just to thank the many organizations and groups, groups like Postpartum Support International, whose president right now sits in the gallery, Ms. Susan Stone; the Family Mental Health Foundation; the American Psychological Association; the American Psychiatric Association; the American College of Obstetricians and Gynecologists; and groups like the Children's Defense Fund, the Melanie Blocker-Stokes Foundation, Suicide Prevention Action Network, Planned Parenthood Federation of America Depression and Bipolar Support Alliance, the Mental Health Alliance, NARAL, so many organizations, including the National Alliance for Mental Illness, the Community Behavioral Healthcare Association, and the March of Dimes. I want to thank these individuals and various activists for their testimony at hearings, for their support, and for their participation.

Madam Speaker, lastly, I want to thank the Members of this Congress, those who, when I asked to become cosponsors, they indicated that they were familiar because they had personal involvement, this dreaded disease has touched them personally; and I want to thank them for their support.

Madam Speaker, I urge that this body pass this much-needed legislation, that this body, indeed, give women the help that they need in fighting this very, very difficult disease.

Mr. FOSSELLA. Madam Speaker, I yield back the balance of my time.

Ms. BALDWIN. Madam Speaker, in closing, I wish to urge my colleagues to support this important bill. As we have heard, postpartum depression is a very serious women's health issue. This bill will raise awareness about postpartum depression and will further research in an effort to find a cure.

□ 1615

Again I want to commend my colleague (Mr. RUSH) for his incredibly hard work on this bill, and I urge my colleagues to support its passage.

Ms. RICHARDSON. Madam Speaker, I rise today to support H.R. 20, the Melanie Blocker-Stokes Postpartum Depression Research and Care Act.

Postpartum depression is a serious mental health problem that can have significant consequences for both the new mother and family. Statistics show up to 800,000 women annually develop this diagnosable prenatal mood disorder; shockingly, less than 15 percent of mothers will receive treatment for the disease.

In California, the results from a 2004 California Women's Health 2007 study indicated that younger females were most at risk for postpartum depression. Females 19 and younger had rates of risk of more than 20 percent; woman 35 and older had the lowest rate, 6.4 percent. In California, woman who are young and/or without health insurance would benefit most from the screening, counseling, diagnosis, and treatment for postpartum depression that this legislation authorizes.

H.R. 20, the Melanie Blocker-Stokes Postpartum Depression Research and Care Act, would ensure that woman at risk for or with postpartum depression are provided adequate and timely prevention and mental health services.

If we are to have any hope of preventing deaths among new mothers and children from this disease, we must identify ways by which we can effectively treat and prevent postpartum psychosis.

I extend my gratitude and thanks to Representative RUSH for bringing this important piece of legislation to the House. His commitment to this issue is commendable.

Ms. BALDWIN. Madam Speaker, I yield back the remainder of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentlewoman from Wisconsin (Ms. BALDWIN) that the House suspend the rules and pass the bill, H.R. 20, as amended.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the yeas have it.

Ms. BALDWIN. Madam Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX and the Chair's prior announcement, further proceedings on this motion will be postponed.

ALS REGISTRY ACT

Ms. BALDWIN. Madam Speaker, I move to suspend the rules and pass the bill (H.R. 2295) to amend the Public Health Service Act to provide for the establishment of an Amyotrophic Lateral Sclerosis Registry, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 2295

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 "ALS Registry Act".

SEC. 2. FINDINGS.

Congress makes the following findings:

(1) Amyotrophic lateral sclerosis (referred to in this section as "ALS") is a fatal, progressive

neurodegenerative disease that affects motor nerve cells in the brain and the spinal cord.

(2) The average life expectancy for a person with ALS is 2 to 5 years from the time of diagnosis.

(3) The cause of ALS is not well understood.

(4) There is only one drug currently approved by the Food and Drug Administration for the treatment of ALS, which has thus far shown only modest effects, prolonging life by just a few months.

(5) There is no known cure for ALS.

(6) More than 5,000 individuals in the United States are diagnosed with ALS annually and as many as 30,000 individuals may be living with ALS in the United States today.

(7) Studies have found relationships between ALS and environmental and genetic factors, but those relationships are not well understood.

(8) Scientists believe that there are significant ties between ALS and other motor neuron diseases.

(9) Several ALS disease registries and databases exist in the United States and throughout the world, including the SODI database, the National Institute of Neurological Disorders and Stroke repository, and the Department of Veterans Affairs ALS Registry.

(10) A single national system to collect and store information on the prevalence and incidence of ALS in the United States does not exist.

(11) In each of fiscal years 2006 and 2007, Congress directed \$887,000 to the Centers for Disease Control and Prevention to begin a nationwide ALS registry.

(12) The Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry have established three pilot projects, beginning in fiscal year 2006, to evaluate the science to guide the creation of a national ALS registry.

(13) The establishment of a national registry will help—

(A) to identify the incidence and prevalence of ALS in the United States;

(B) to collect data important to the study of ALS;

(C) to promote a better understanding of ALS;

(D) to collect information that is important for research into the genetic and environmental factors that cause ALS;

(E) to strengthen the ability of a clearinghouse—

(i) to collect and disseminate research findings on environmental, genetic, and other causes of ALS and other motor neuron disorders that can be confused with ALS, misdiagnosed as ALS, and in some cases progress to ALS;

(ii) to make available information to patients about research studies for which they may be eligible; and

(iii) to maintain information about clinical specialists and clinical trials on therapies; and

(F) to enhance efforts to find treatments and a cure for ALS.

SEC. 3. AMENDMENT TO THE PUBLIC HEALTH SERVICE ACT.

Part P of title III of the Public Health Service Act (42 U.S.C. 280g et seq.) is amended by adding at the end the following:

"SEC. 399R. AMYOTROPHIC LATERAL SCLEROSIS REGISTRY.

"(a) ESTABLISHMENT.—

"(1) IN GENERAL.—Not later than 1 year after the receipt of the report described in subsection (b)(3), the Secretary, acting through the Director of the Centers for Disease Control and Prevention and in consultation with a national voluntary health organization with experience serving the population of individuals with amyotrophic lateral sclerosis (referred to in this section as 'ALS'), shall—

"(A) develop a system to collect data on ALS and other motor neuron disorders that can be confused with ALS, misdiagnosed as ALS, and in some cases progress to ALS, including information with respect to the incidence and prevalence of the disease in the United States; and

“(B) establish a national registry for the collection and storage of such data to include a population-based registry of cases in the United States of ALS and other motor neuron disorders that can be confused with ALS, misdiagnosed as ALS, and in some cases progress to ALS.

“(2) PURPOSE.—It is the purpose of the registry established under paragraph (1)(B) to gather available data concerning—

“(A) ALS, including the incidence and prevalence of ALS in the United States;

“(B) the environmental and occupational factors that may be associated with the disease;

“(C) the age, race or ethnicity, gender, and family history of individuals who are diagnosed with the disease;

“(D) other motor neuron disorders that can be confused with ALS, misdiagnosed as ALS, and in some cases progress to ALS; and

“(E) other matters as recommended by the Advisory Committee established under subsection (b).

“(b) ADVISORY COMMITTEE.—

“(1) ESTABLISHMENT.—Not later than 90 days after the date of the enactment of this section, the Secretary, acting through the Director of the Centers for Disease Control and Prevention, shall establish a committee to be known as the Advisory Committee on the National ALS Registry (referred to in this section as the ‘Advisory Committee’). The Advisory Committee shall be composed of at least one member, to be appointed by the Secretary, acting through the Director of the Centers for Disease Control and Prevention, representing each of the following:

“(A) National voluntary health associations that focus solely on ALS and have demonstrated experience in ALS research, care, and patient services, as well as other voluntary associations focusing on neurodegenerative diseases that represent and advocate on behalf of patients with ALS and patients with other motor neuron disorders that can be confused with ALS, misdiagnosed as ALS, and in some cases progress to ALS.

“(B) The National Institutes of Health, to include, upon the recommendation of the Director of the National Institutes of Health, representatives from the National Institute of Neurological Disorders and Stroke and the National Institute of Environmental Health Sciences.

“(C) The Department of Veterans Affairs.

“(D) The Agency for Toxic Substances and Disease Registry.

“(E) The Centers for Disease Control and Prevention.

“(F) Patients with ALS or their family members.

“(G) Clinicians with expertise on ALS and related diseases.

“(H) Epidemiologists with experience in data registries.

“(I) Geneticists or experts in genetics who have experience with the genetics of ALS or other neurological diseases.

“(J) Statisticians.

“(K) Ethicists.

“(L) Attorneys.

“(M) Other individuals with an interest in developing and maintaining the National ALS Registry.

“(2) DUTIES.—The Advisory Committee shall review information and make recommendations to the Secretary concerning—

“(A) the development and maintenance of the National ALS Registry;

“(B) the type of information to be collected and stored in the Registry;

“(C) the manner in which such data is to be collected;

“(D) the use and availability of such data including guidelines for such use; and

“(E) the collection of information about diseases and disorders that primarily affect motor neurons that are considered essential to furthering the study and cure of ALS.

“(3) REPORT.—Not later than 1 year after the date on which the Advisory Committee is estab-

lished, the Advisory Committee shall submit a report concerning the review conducted under paragraph (2) that contains the recommendations of the Advisory Committee with respect to the results of such review.

“(c) GRANTS.—Notwithstanding the recommendations of the Advisory Committee under subsection (b), the Secretary, acting through the Director of the Centers for Disease Control and Prevention, may award grants to, and enter into contracts and cooperative agreements with, public or private nonprofit entities for the collection, analysis, and reporting of data on ALS and other motor neuron disorders that can be confused with ALS, misdiagnosed as ALS, and in some cases progress to ALS.

“(d) COORDINATION WITH STATE, LOCAL, AND FEDERAL REGISTRIES.—

“(1) IN GENERAL.—In establishing the National ALS Registry under subsection (a), the Secretary, acting through the Director of the Centers for Disease Control and Prevention, shall—

“(A) identify, build upon, expand, and coordinate among existing data and surveillance systems, surveys, registries, and other Federal public health and environmental infrastructure wherever possible, including—

“(i) the 3 ALS registry pilot projects initiated in fiscal year 2006 by the Centers for Disease Control and Prevention and the Agency for Toxic Substances and Disease Registry at the South Carolina Office of Research & Statistics; the Mayo Clinic in Rochester, Minnesota; and Emory University in Atlanta, Georgia;

“(ii) the Department of Veterans Affairs ALS Registry;

“(iii) the DNA and Cell Line Repository of the National Institute of Neurological Disorders and Stroke Human Genetics Resource Center;

“(iv) the Agency for Toxic Substances and Disease Registry studies, including studies conducted in Illinois, Missouri, El Paso and San Antonio, Texas, and Massachusetts;

“(v) State-based ALS registries, including the Massachusetts ALS Registry;

“(vi) the National Vital Statistics System; and

“(vii) any other existing or relevant databases that collect or maintain information on those motor neuron diseases recommended by the Advisory Committee established in subsection (b); and

“(B) provide for research access to ALS data as recommended by the Advisory Committee established in subsection (b) to the extent permitted by applicable statutes and regulations and in a manner that protects personal privacy consistent with applicable privacy statutes and regulations.

“(2) COORDINATION WITH NIH AND DEPARTMENT OF VETERANS AFFAIRS.—Notwithstanding the recommendations of the Advisory Committee established in subsection (b), and consistent with applicable privacy statutes and regulations, the Secretary shall ensure that epidemiological and other types of information obtained under subsection (a) is made available to the National Institutes of Health and the Department of Veterans Affairs.

“(e) DEFINITION.—For the purposes of this section, the term ‘national voluntary health association’ means a national non-profit organization with chapters or other affiliated organizations in States throughout the United States.

“(f) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to carry out this section, \$25,000,000 for fiscal year 2008, and \$16,000,000 for each of the fiscal years 2009 through 2012.”

The SPEAKER pro tempore. Pursuant to the rule, the gentlewoman from Wisconsin (Ms. BALDWIN) and the gentleman from New York (Mr. FOSSELLA) each will control 20 minutes.

The Chair recognizes the gentlewoman from Wisconsin.

GENERAL LEAVE

Ms. BALDWIN. Madam Speaker, I ask unanimous consent that all Members have 5 legislative days to revise and extend their remarks and include extraneous material on the bill under consideration.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from Wisconsin?

There was no objection.

Ms. BALDWIN. Madam Speaker, I yield myself such time as I might consume.

Madam Speaker, I rise in support of H.R. 2295 the ALS Registry Act. Amyotrophic lateral sclerosis, or ALS, more commonly known as Lou Gehrig's disease, is a fatal, progressive neurodegenerative disease affecting approximately 5,600 Americans each year. It is estimated that as many as 30,000 Americans have ALS at any given time with an average life expectancy of 2 to 5 years from the time of diagnosis. Today, no single national patient registry collects and stores information on the prevalence and incidence of ALS.

The ALS Registry Act would create a nationwide registry at the Centers for Disease Control and Prevention for ALS and other related motor neuron disorders. The patient registry would collect data which is urgently needed for ALS research, disease management, and the development of standards of care. This will allow us to make real progress toward better understanding ALS, and to develop measures for prevention, treatment and cure of this dreaded disease.

Madam Speaker, I would like to thank my friend and colleague, Representative ELIOT ENGEL, for his dedication to bringing this bill before us today. Madam Speaker, I strongly urge my colleagues to support H.R. 2295.

I reserve the balance of my time.

Mr. FOSSELLA. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I would also like to thank Congressman ENGEL and Congressman TERRY for their efforts in the establishment of the ALS Registry Act. As we know, we have an annual event here in Congress when we get visits from members of the ALS organization, the association, and their advocates, but more importantly the citizens of this country who have been afflicted with Lou Gehrig's disease. It is gut-wrenching to watch knowing full well what a debilitating disease it is, and it knows no boundaries. As has been mentioned by my colleagues, perhaps 30,000 Americans, perhaps 1,000 in New York State alone, are suffering with ALS. I know a gentleman on Staten Island who helped to have built one of the largest banks in Staten Island, if not the largest, retiring, thinking he was going to enjoy his golden years, and soon after that became diagnosed with ALS. To watch the horrific progression over the last couple of years is, as I mentioned, gut-wrenching not

just to his friends but, I am sure, his family.

That is why I think it is important that Congress finally step up and act, and as a cosponsor of the legislation today, I am pleased to see it brought to the House floor today.

I would like to thank the tireless efforts of the ALS Association and advocates in educating and advocating for a cure, which is what we all want. Unfortunately, we know little about ALS, a disease that is diagnosed for 5,600 Americans each year. Without a cure and without treatments to slow the progression of the disease, as has been mentioned by Ms. BALDWIN, the average life expectancy of a person is only 2 to 5 years. It is a death sentence once diagnosed. The rapid progression, lack of understanding about its cause, and debilitating nature of the disease make it particularly hard on those afflicted with ALS, as well as their family and friends.

We need to give scientists the tools they need to find the treatment and cure for ALS. The registry does just that. It creates a single, national patient registry to collect and store information on the prevalence of incidences of ALS in the U.S. We know of several research studies ongoing at the NIH and other private facilities, investigating possible risk factors that may be associated with ALS. Researchers are working to better determine what genetics and/or environmental factors are contributing to developing ALS.

While there has been incredible and groundbreaking advances in science that give hope to people with Lou Gehrig's disease and their families, this legislation will provide an important new link that will allow scientists to take emerging new discoveries ever closer to a cure. And I pray that one day we will have that cure so no families or individuals will be afflicted by this terrible disease.

Madam Speaker, I stand in support, urge adoption and reserve the balance of my time.

Ms. BALDWIN. Madam Speaker, I yield 4 minutes to the bill's author, the distinguished gentleman from New York (Mr. ENGEL).

Mr. ENGEL. Madam Speaker, I thank the gentlewoman from Wisconsin for yielding to me.

Madam Speaker, I wish to thank you for bringing up the ALS Registry Act of 2007 for a vote, H.R. 2295. This is truly a bipartisan measure, as well it should be. I introduced this bill with my colleague, LEE TERRY of Nebraska, and we are proud to have the support of over 275 bipartisan members of Congress.

I know that the gentlewoman from Wisconsin who sat next to me on the committee was very concerned about this bill. I am glad that the gentleman from New York (Mr. FOSSELLA) is here, as well, because I have a picture here of Lou Gehrig who, of course, puts a face on this disease. ALS is very often

known as Lou Gehrig's disease, and we all remember the Yankee Clipper, Lou Gehrig. Mr. FOSSELLA and I, both coming from New York, we know Lou Gehrig and his tradition very, very well.

Amyotrophic lateral sclerosis, or ALS, is a fatal, progressive neurodegenerative disease that affects motor nerve cells in the brain and spinal cord. It is very similar to multiple sclerosis. While the great baseball player, Lou Gehrig, put a national face on ALS over 65 years ago, my own family was devastated by the death of my grandmother, Dora Engel, my father's mother, who is believed to have passed away as a result of ALS when she was about 58 years old.

Unfortunately, families across the Nation face challenges and experience the suffering associated with ALS every single day. As was mentioned before, 5,600 people in the U.S. are diagnosed with ALS each year. It is estimated that as many as 30,000 Americans have the disease at any given time. The average life expectancy for a person who is diagnosed with ALS is only 2 to 5 years from the time of diagnosis.

As was mentioned, the causes of ALS are not well understood and there is no known cure. We need to provide hope to change this tragedy today.

Surprisingly, a single national patient registry which collects and stores information on the prevalence and incidence of ALS does not currently exist in the United States today. The legislation I introduced with my colleague (Mr. TERRY) would create an ALS registry at the Centers for Disease Control and Prevention and aid in the search for a cure from this devastating disease. The registry would collect key data, and information is determined by a newly created Federal Advisory Committee on the National ALS Registry.

The ALS Registry Act will also build upon a fiscal year 2006 and fiscal year 2007 congressional appropriation which directed the CDC to evaluate the science to guide the creation of a National ALS Registry.

I wish to express my gratitude to the staff of the Centers for Disease Control and Prevention, and in particular to the ALS Association, who worked for months with me and my staff to improve the bill that we had introduced in the previous 109th Congress. I also want to thank Chairman DINGELL, Ranking Member BARTON, House Subcommittee Chairman PALLONE and Ranking Member DEAL for their support of the ALS Registry Act. Finally, I especially want to thank John Ford and William Garner of Chairman DINGELL's staff and Katherine Martin of Ranking Member BARTON's staff for shepherding this bill through the Energy and Commerce Committee. I want to thank Emily Gibbons of my own staff, my legislative director, who was also my health expert and really did more for this than anybody else I know.

The establishment of a registry will bring new hope to thousands of patients and their families that ALS will no longer be a death sentence. I thank my colleagues, and Madam Speaker, I urge the swift passage of the ALS Registry Act, H.R. 2295, today.

Mr. FOSSELLA. I reserve the balance of my time.

Ms. BALDWIN. Madam Speaker, I yield 1½ minutes to the gentlewoman from South Dakota, Congresswoman HERSETH SANDLIN.

Ms. HERSETH SANDLIN. Madam Speaker, I rise in support of H.R. 2295, the ALS Registry Act, introduced by the gentleman from New York (Mr. ENGEL). I would like to thank my friend and colleague from Wisconsin (Ms. BALDWIN) for yielding me time.

No one who knows or has met someone diagnosed with ALS can fail to be moved by the courage, not only of those experiencing the symptoms of this disease, but of their family, who help them cope with it every day.

During the National ALS Awareness Month in May, I met with one such remarkable family. Daryl and Marlene Thorson of Brandon, South Dakota, and their granddaughter, Elizabeth Steel, took the time to visit with me. They discussed the importance of this legislation to create a National ALS Registry, and they talked about living with ALS. Daryl has been diagnosed with ALS, and his wife is a pillar of strength as they go through this together. Their love was clear, as was their determination. I was struck by their 12-year-old granddaughter, Elizabeth, who sees how the disease has affected her grandfather and sees her grandmother caring for him. Elizabeth wrote an essay for school entitled, "If I Had a Million Dollars, What Would I Buy?" And Elizabeth dedicated her entire essay to buying supplies for her grandfather, funding research, and advocating to Members of Congress.

Madam Speaker, by establishing a National ALS Registry and providing the requisite funding, we can help facilitate the efforts of so many across the country, like Elizabeth, like the scientists searching for a cure, who are working to conquer ALS and bring comfort to those afflicted with it. I urge my colleagues to support this important legislation.

Mr. FOSSELLA. Madam Speaker, I am told that my colleague has no further speakers, so I would close. And as I mentioned, I have been here now 10 years. I can recall a gentleman by the name of Gary Anderson coming up after being diagnosed, a friend from Staten Island, and passing after suffering for too long from ALS. It is a terrible indictment, Lou Gehrig's disease, that it is, and one day, as we say, perhaps this registry will get to a point where no longer will our fellow citizens have to suffer. So, for people like Gary Anderson, to this day, a gentleman I mentioned before, Harry Doherty, who is currently suffering as we speak, I would urge the adoption of this.

I yield back the balance of my time. Ms. BALDWIN. Madam Speaker, in closing, I strongly support this bill. As we have heard, this bill would collect data which is urgently needed for ALS research and will go a long way toward moving us closer to treatments and a cure for this devastating illness.

Again, I wish to recognize my colleague (Mr. ENGEL) and other colleagues who have spoken today who put a personal face and a personal story behind this important legislation.

Madam Speaker, I urge my colleagues to support this bill.

Mr. TERRY. Madam Speaker, I rise today in strong support of The ALS Registry Act of 2007, originally introduced in May by my colleague Representative ELIOT ENGEL of New York and myself. As the bill comes to the floor, we have been joined by 275 bipartisan cosponsors in support of this important legislation.

Amyotrophic Lateral Sclerosis (ALS) is a fatal, progressive, neurodegenerative disease affecting motor nerve cells in the brain and spinal cord. Approximately 5,600 people in the U.S. are diagnosed with ALS, also known as Lou Gehrig's Disease, each year. It is estimated that as many as 30,000 Americans have the disease. The average life expectancy for a person with ALS is two to five years from the time of diagnosis. There is no known cure for ALS.

The most important provision in our bill establishes a national ALS registry. There is currently no single national registry which collects and stores information on the prevalence and incidence of ALS in existence in the United States. The establishment of a national registry will help identify the occurrence and frequency of ALS and other motor neuron disorders and collect data which is badly needed for ALS research, disease management and the development of standards of care in order to significantly enhance the nation's efforts to find a treatment and cure for ALS.

A recent article from the New England Journal of Medicine stated that "approximately 90 percent of the persons with ALS have the sporadic form, which may be caused by the interaction of multiple environmental factors and previously unknown genes." The purpose of creating a registry is to identify if there are any geographic, genetic or environmental groups of people that have been diagnosed with this terrible disease. This would then allow scientists a better opportunity to identify any relevant factors. This registry may sound simple on the surface, but it is actually a significant tool in determining the root causes of ALS, which would hopefully lead to diagnostic tests and screenings to see who is susceptible to the disease.

Although we know the debilitating effects of ALS, I am moved every year when I am visited by patients and their families in my Washington office. Despite the extremely challenging medical conditions faced by these patients, they make an extraordinary effort to travel to the Capitol and share their stories in the hope that we will soon find effective treatments and a potential cure so that no one like them will have to suffer in the future. The courage shown by ALS patients, as well as their families, is inspiring to me.

All diseases bring hardships on those afflicted, but ALS is particularly cruel in the

quickness of the onset, the severity of the symptoms and the fatal nature of the condition. The provisions in our bill creating a nationwide registry for persons afflicted with ALS are important steps forward in strengthening the efforts to understand, treat and one day eradicate this terrible disease. I urge my colleagues to support the ALS Registry Act and I am proud to have worked on this very important effort with my friend Mr. ENGEL. I am also grateful that our committee, the Energy and Commerce Committee, took up this legislation and advanced the bill to the floor.

Mr. PATRICK J. MURPHY of Pennsylvania. Madam Speaker, I rise today in support of H.R. 2295, to amend the Public Health Service Act to provide for the establishment of an Amyotrophic Lateral Sclerosis Registry.

ALS, more commonly known as Lou Gehrig's disease, is a particularly cruel disease and is always fatal, usually between two and five years after diagnosis. One of the very few trends researchers have been able to identify is that veterans are twice as likely to die from ALS as those who have not served in the military. However, Madam Speaker, it can strike at any time, regardless of age, race, gender or nationality.

This fight is personal for me, as my good friend Shelbie Oppenheimer, and her husband Jeff have long been advocates for those with ALS.

Shelbie was diagnosed when she was just 28 years old and has since spent countless hours educating friends, family, community members and elected officials. Shelbie has been fortunate—still fighting after 10 years.

The Oppenheimers have created a wonderful organization based in my district in Bucks County, Pennsylvania: Shelbie.org.

Along with many community partners, they work tirelessly to provide opportunities for the children of ALS patients. Jeff and Shelbie, along with their daughter Isabel, are a constant inspiration to me and I join them in the fight to turn ALS from a disease to a memory.

It is for Shelbie, Jeff, Isabel and countless others that I am proud to be a cosponsor of this bill. This legislation will create, through the Centers for Disease Control and Prevention, a single, nationwide ALS registry. This Registry is essential to advancing the search for treatments and the cure.

Since we don't know the cause or the cure of ALS, research is the key. Enabling researchers, doctors and patients to understand the trends and history of the disease is vital to moving forward. The Registry will gather data on the environmental and occupational factors that may contribute to the disease, including the age, race and ethnicity of individuals with ALS, the patients' family histories and other information that may be beneficial to advancing research and care.

Madam Speaker, I urge all of my colleagues to join this fight and support the ALS Registry Act and vote yes on H.R. 2295.

Mr. SHAYS. Madam Speaker, I am an original cosponsor of H.R. 2295, the ALS Registry Act. The legislation would direct the Centers for Disease Control and Prevention to develop a system to collect data on ALS and establish a national registry for the collection and storage of this data.

Creating the registry will allow us to better understand the incidence and prevalence of the disease, the age, race and ethnicity of people who have it, and whether there are any

environmental factors that are associated with the disease.

ALS, commonly known as Lou Gehrig's Disease, is a progressive neuromuscular disease characterized by a degeneration of the nerve cells of the brain and spinal cord leading to the wasting of muscles, paralysis and eventual death. Approximately 30,000 individuals in the United States are afflicted with ALS, with approximately 5,000 new cases each year.

The life expectancy of an individual with ALS is 3 to 5 years from the time of diagnosis. While there is no known cure or cause for ALS, aggressive treatment of the symptoms of ALS can extend the lives of those with the disease. Promising research gives hope that one day this deadly and debilitating disease will be cured.

Ms. BALDWIN. I yield back the remainder of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentlewoman from Wisconsin (Ms. BALDWIN) that the House suspend the rules and pass the bill, H.R. 2295, as amended.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the yeas have it.

Ms. BALDWIN. Madam Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX and the Chair's prior announcement, further proceedings on this motion will be postponed.

□ 1630

CHRISTOPHER AND DANA REEVE PARALYSIS ACT

Ms. BALDWIN. Madam Speaker, I move to suspend the rules and pass the bill (H.R. 1727) to enhance and further research into paralysis and to improve rehabilitation and the quality of life for persons living with paralysis and other physical disabilities, and for other purposes, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 1727

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 "Christopher and Dana Reeve Paralysis Act".

SEC. 2. TABLE OF CONTENTS.

Sec. 1. Short title.

Sec. 2. Table of contents.

TITLE I—PARALYSIS RESEARCH

Sec. 101. Activities of the National Institutes of Health with respect to research on paralysis.

TITLE II—PARALYSIS REHABILITATION RESEARCH AND CARE

Sec. 201. Activities of the National Institutes of Health with respect to research with implications for enhancing daily function for persons with paralysis.

TITLE III—IMPROVING QUALITY OF LIFE FOR PERSONS WITH PARALYSIS AND OTHER PHYSICAL DISABILITIES

Sec. 301. Programs to improve quality of life for persons with paralysis and other physical disabilities.

TITLE I—PARALYSIS RESEARCH**SEC. 101. ACTIVITIES OF THE NATIONAL INSTITUTES OF HEALTH WITH RESPECT TO RESEARCH ON PARALYSIS.**

(a) **COORDINATION.**—The Director of the National Institutes of Health (referred to in this Act as the “Director”), pursuant to the general authority of the Director, may develop mechanisms to coordinate the paralysis research and rehabilitation activities of the Institutes and Centers of the National Institutes of Health in order to further advance such activities and avoid duplication of activities.

(b) **CHRISTOPHER AND DANA REEVE PARALYSIS RESEARCH CONSORTIA.**—

(1) **IN GENERAL.**—The Director may make awards of grants to public or private entities to pay all or part of the cost of planning, establishing, improving, and providing basic operating support for consortia in paralysis research. The Director shall designate each consortium funded through such grants as a Christopher and Dana Reeve Paralysis Research Consortium.

(2) **RESEARCH.**—Each consortium under paragraph (1)—

(A) may conduct basic, translational, and clinical paralysis research;

(B) may focus on advancing treatments and developing therapies in paralysis research;

(C) may focus on one or more forms of paralysis that result from central nervous system trauma or stroke;

(D) may facilitate and enhance the dissemination of clinical and scientific findings; and

(E) may replicate the findings of consortia members or other researchers for scientific and translational purposes.

(3) **COORDINATION OF CONSORTIA; REPORTS.**—The Director may, as appropriate, provide for the coordination of information among consortia under paragraph (1) and ensure regular communication among members of the consortia, and may require the periodic preparation of reports on the activities of the consortia and the submission of the reports to the Director.

(4) **ORGANIZATION OF CONSORTIA.**—Each consortium under paragraph (1) may use the facilities of a single lead institution, or be formed from several cooperating institutions, meeting such requirements as may be prescribed by the Director.

(c) **PUBLIC INPUT.**—The Director may provide for a mechanism to educate and disseminate information on the existing and planned programs and research activities of the National Institutes of Health with respect to paralysis and through which the Director can receive comments from the public regarding such programs and activities.

TITLE II—PARALYSIS REHABILITATION RESEARCH AND CARE**SEC. 201. ACTIVITIES OF THE NATIONAL INSTITUTES OF HEALTH WITH RESPECT TO RESEARCH WITH IMPLICATIONS FOR ENHANCING DAILY FUNCTION FOR PERSONS WITH PARALYSIS.**

(a) **IN GENERAL.**—The Director, pursuant to the general authority of the Director, may make awards of grants to public or private entities to pay all or part of the costs of planning, establishing, improving, and providing basic operating support to multicenter networks of clinical sites that will collaborate to design clinical rehabilitation intervention protocols and measures of outcomes on one or more forms of paralysis that result from central nervous system trauma, disorders, or stroke, or any combination of such conditions.

(b) **RESEARCH.**—A multicenter network of clinical sites funded through this section may—

(1) focus on areas of key scientific concern, including—

(A) improving functional mobility;

(B) promoting behavioral adaptation to functional losses, especially to prevent secondary complications;

(C) assessing the efficacy and outcomes of medical rehabilitation therapies and practices and assisting technologies;

(D) developing improved assistive technology to improve function and independence; and

(E) understanding whole body system responses to physical impairments, disabilities, and societal and functional limitations; and

(2) replicate the findings of network members or other researchers for scientific and translational purposes.

(c) **COORDINATION OF CLINICAL TRIALS NETWORKS; REPORTS.**—The Director may, as appropriate, provide for the coordination of information among networks funded through this section and ensure regular communication among members of the networks, and may require the periodic preparation of reports on the activities of the networks and submission of reports to the Director.

TITLE III—IMPROVING QUALITY OF LIFE FOR PERSONS WITH PARALYSIS AND OTHER PHYSICAL DISABILITIES**SEC. 301. PROGRAMS TO IMPROVE QUALITY OF LIFE FOR PERSONS WITH PARALYSIS AND OTHER PHYSICAL DISABILITIES.**

(a) **IN GENERAL.**—The Secretary of Health and Human Services (in this title referred to as the “Secretary”) may study the unique health challenges associated with paralysis and other physical disabilities and carry out projects and interventions to improve the quality of life and long-term health status of persons with paralysis and other physical disabilities. The Secretary may carry out such projects directly and through awards of grants or contracts.

(b) **CERTAIN ACTIVITIES.**—Activities under subsection (a) may include—

(1) the development of a national paralysis and physical disability quality of life action plan, to promote health and wellness in order to enhance full participation, independent living, self-sufficiency, and equality of opportunity in partnership with voluntary health agencies focused on paralysis and other physical disabilities, to be carried out in coordination with the State-based Disability and Health Program of the Centers for Disease Control and Prevention;

(2) support for programs to disseminate information involving care and rehabilitation options and quality of life grant programs supportive of community-based programs and support systems for persons with paralysis and other physical disabilities;

(3) in collaboration with other centers and national voluntary health agencies, the establishment of a population-based database that may be used for longitudinal and other research on paralysis and other disabling conditions; and

(4) the replication and translation of best practices and the sharing of information across States, as well as the development of comprehensive, unique, and innovative programs, services, and demonstrations within existing State-based disability and health programs of the Centers for Disease Control and Prevention which are designed to support and advance quality of life programs for persons living with paralysis and other physical disabilities focusing on—

(A) caregiver education;

(B) promoting proper nutrition, increasing physical activity, and reducing tobacco use;

(C) education and awareness programs for health care providers;

(D) prevention of secondary complications;

(E) home- and community-based interventions;

(F) coordinating services and removing barriers that prevent full participation and integration into the community; and

(G) recognizing the unique needs of underserved populations.

(c) **GRANTS.**—The Secretary may award grants in accordance with the following:

(1) To State and local health and disability agencies for the purpose of—

(A) establishing a population-based database that may be used for longitudinal and other research on paralysis and other disabling conditions;

(B) developing comprehensive paralysis and other physical disability action plans and activities focused on the items listed in subsection (b)(4);

(C) assisting State-based programs in establishing and implementing partnerships and collaborations that maximize the input and support of people with paralysis and other physical disabilities and their constituent organizations;

(D) coordinating paralysis and physical disability activities with existing State-based disability and health programs;

(E) providing education and training opportunities and programs for health professionals and allied caregivers; and

(F) developing, testing, evaluating, and replicating effective intervention programs to maintain or improve health and quality of life.

(2) To private health and disability organizations for the purpose of—

(A) disseminating information to the public;

(B) improving access to services for persons living with paralysis and other physical disabilities and their caregivers;

(C) testing model intervention programs to improve health and quality of life; and

(D) coordinating existing services with State-based disability and health programs.

(d) **COORDINATION OF ACTIVITIES.**—The Secretary shall ensure that activities under this section are coordinated as appropriate by the agencies of the Department of Health and Human Services.

(e) **AUTHORIZATION OF APPROPRIATIONS.**—For the purpose of carrying out this section, there is authorized to be appropriated \$25,000,000 for each of fiscal years 2008 through 2011.

The SPEAKER pro tempore. Pursuant to the rule, the gentlewoman from Wisconsin (Ms. BALDWIN) and the gentleman from New York (Mr. FOSSELLA) each will control 20 minutes.

The Chair recognizes the gentlewoman from Wisconsin.

GENERAL LEAVE

Ms. BALDWIN. Madam Speaker, I ask unanimous consent that all Members have 5 legislative days within which to revise and extend their remarks and include extraneous material on the bill under consideration.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from Wisconsin?

There was no objection.

Ms. BALDWIN. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I rise today in support of H.R. 1727, the Christopher and Dana Reeve Paralysis Act. I am honored to have known Christopher and Dana Reeve, and it is fitting that we are considering this bill today just after the 3-year anniversary of Christopher's death.

As we know, sometimes hardships and painful experiences are the starting point for an incredible advocacy, and this was certainly the case with Christopher and Dana Reeve. In turn, the Christopher and Dana Reeve Paralysis Act reflects our desire to carry out their work and improve the lives of, and hasten better treatments and cures for, people living with paralysis.

Madam Speaker, as many of my colleagues may be aware, millions of

Americans live with paralysis. Two million Americans live with paralysis of the extremities; a quarter million Americans live with spinal cord injuries; 4 million Americans live with the effects of stroke; 250,000 to 350,000 Americans have been diagnosed with some form of multiple sclerosis; half a million children and adults in the U.S. have been diagnosed with cerebral palsy; and 30,000 Americans, as we have just heard, live with ALS, also known as Lou Gehrig's disease.

This legislation is multifaceted and seeks to address several aspects of paralysis research and quality-of-life issues. The bill expands research on paralysis at the NIH by encouraging collaborative research to connect scientists doing similar work and enhanced understanding and speed discovery of better treatment and cures. The bill also encourages research to enhance the daily function of people with paralysis, including improving their functional mobility, assessing the efficacy and outcomes of medical rehabilitation therapies, and developing improved assistive technology to improve function and independence.

Lastly, the bill seeks to improve the quality of life and health of persons with paralysis and other physical disabilities by supporting programs to disseminate information involving care and rehabilitation options. It also coordinates best practices designed to support and advance quality-of-life programs for persons living with paralysis and other physical disabilities.

Madam Speaker, Christopher and Dana Reeve used their visibility to work on behalf of families in all parts of this country who face the challenges of paralysis and impaired mobility. I have been honored to carry on their work and am honored to work on this legislation with Congresswoman BONO, Congressman LANGEVIN, and Congressman BILIRAKIS. I am also thankful to have had the opportunity to work with the Christopher and Dana Reeve Foundation and the thousands of paralysis advocates who have worked for the passage of this bill.

Madam Speaker, I urge all of my colleagues to join me in supporting the Christopher and Dana Reeve Paralysis Act.

Madam Speaker, I reserve the balance of my time.

Mr. FOSSELLA. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I rise today as well in support of H.R. 1727, the Christopher and Dana Reeve Paralysis Act, introduced by Representatives BALDWIN, BONO, and BILIRAKIS. My colleague from Wisconsin stated very eloquently the statistics and the justification for this act, and it is long overdo. As was mentioned, the legislation would authorize the Director of the National Institutes of Health to coordinate paralysis research through the NIH Institutes and Centers.

Research would be focused on basic, translational, and multicenter net-

works of clinical sites focused on designing clinical rehabilitation protocols for one or more forms of paralysis. Such paralysis research would include paralysis from the central nervous system trauma, disorders, stroke, or any combination of such conditions. Additionally, the legislation would authorize the Secretary of Health and Human Services to award grants for activities related to paralysis, including grants to establish paralysis registries and disseminate information to the public.

Madam Speaker, we have seen over the years how the Reeves served as strong advocates for the paralysis community, meeting with a wide variety of colleagues in the House and the Senate over the last several years. Their dignified presence in Washington will be greatly missed. I believe that through legislative initiatives such as this one the work done by the Christopher and Dana Reeve Foundation will continue that work that was left unfinished, and will be done so in a respectful manner.

As the population continues to grow and to age, I think more and more of society will be confronted with the likes of paralysis. It is our job, and I think responsibility, to partner with the private sector to bring awareness, funding, and education to ensure that as few people as possible are brought down by this illness.

Madam Speaker, I reserve the balance of my time.

Ms. BALDWIN. Madam Speaker, I have no further Members seeking time, and continue to reserve the balance of my time.

Mr. FOSSELLA. Madam Speaker, it is my pleasure and honor to yield 3 minutes to the gentleman from Florida (Mr. BILIRAKIS), a leader in this cause and a sponsor of this legislation.

Mr. BILIRAKIS. Madam Speaker, I rise today in support of H.R. 1727, the Christopher and Dana Reeve Paralysis Act. Millions of Americans suffer from paralysis and mobility impairment. They struggle each and every day to perform even the most basic of tasks that most of us take for granted. The impact this impairment has on the lives and the lives of those who love them and care for them is staggering. As one who has struggled with hearing and vision problems nearly my entire life, I know how difficult any physical impairment can be, both physically and emotionally; but I cannot imagine what people with severe paralysis go through and their constant struggle to maintain hope that they one day will walk or move again.

Madam Speaker, I am very proud to be an original cosponsor of this bill, which will encourage collaborative research in paralysis and hasten the discovery of treatments and potential cures to improve the lives of people with paralysis. I am especially pleased that this bill is modeled after legislation I introduced at the beginning of this Congress. My bill, the language of which this bill includes, also has provisions to utilize VA facilities to im-

prove paralysis research and better track the work that is being done in this area within the world's largest system of hospitals.

Madam Speaker, I want to thank Congresswoman TAMMY BALDWIN for sponsoring this bill, and also Energy and Commerce Committee Chairman JOHN DINGELL and Ranking Member JOE BARTON for moving it through their committee. I also want to give special thanks to my father, former Congressman Mike Bilirakis, who first introduced this bill several years ago after meeting the extraordinary men and women for whom this bill was named. His persistence and determination helped build the necessary support to get us where we are today.

Although I never had the honor of meeting Christopher or Dana Reeve personally, my father has shared with me their strength, dignity, and courage in dealing with what only people similarly situated can fully understand. They pushed to the national forefront the issue of the need for better research into paralysis and greater emphasis on rehabilitation. I wish they were here to share this moment with us today, though I am sure they are both smiling down on our efforts here today.

Madam Speaker, I believe we can and must do more for those suffering from paralysis and mobility impairment. I urge all my colleagues to help take a significant step forward in this area by supporting this bill today.

Ms. BALDWIN. Madam Speaker, I continue to reserve the balance of my time.

Mr. FOSSELLA. Madam Speaker, let me just once again thank Mr. BILIRAKIS and, of course, his father for spearheading this when he was in the House, and Ms. BALDWIN and Mrs. BONO for bringing this to the floor. We know how paralysis, especially sudden paralysis, can damage one's life and that of their family, and it becomes a lifelong commitment. Once again, I think Congress has a real fundamental responsibility to ensure we can bring as much peace and peace of mind to those families. With that, I urge the adoption of this bill.

Madam Speaker, I yield back the balance of my time.

Ms. BALDWIN. Madam Speaker, in closing, as we remember Christopher Reeve just after the third anniversary of his passing, we honor him by having the House consider today and pass one of the truly first comprehensive bills focused on paralysis research and care for those who are paralyzed. I urge Members to strongly support this bill.

Ms. SUTTON. Madam Speaker, I rise today in strong support of H.R. 1727, the Christopher and Dana Reeve Quality of Life for Persons with Paralysis Act. And as I express my support for this legislation today, I would like to recognize an outstanding organization in my district, Linking Employment, Abilities, and Potential, or LEAP.

LEAP provides hope and empowerment for tens of thousands of people with disabilities and their families throughout Northeast Ohio.

Through legislation such as the Christopher and Dana Reeve Paralysis Act, Congress sends a message about people with disabilities—that they matter, that they can and do make valuable contributions to society. That is a message that LEAP and so many disability rights advocates send every day.

LEAP is deeply committed to empowering people with disabilities in the workplace through specialized skill development programs, at home through independent living training, in the medical system through access to the best medical care, and in so many other aspects of society. LEAP's Disability Employment Training Program, in particular, aligns with the goals of Christopher and Dana Reeve, who fought so hard for integration and acceptance for those with disabilities in our communities. LEAP has an 80 percent success rate in employment training and placement and has a tremendous impact on the community, recognizing the many talents of people with disabilities and the potential to be productive citizens.

Once again, I rise to express my support for H.R. 1727, and to honor Linking Employment, Abilities, and Potential.

Ms. BALDWIN. Madam Speaker, I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentlewoman from Wisconsin (Ms. BALDWIN) that the House suspend the rules and pass the bill, H.R. 1727, as amended.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill, as amended, was passed.

A motion to reconsider was laid on the table.

SUPPORTING THE GOALS AND IDEALS OF A LONG-TERM CARE AWARENESS WEEK

Ms. BALDWIN. Madam Speaker, I move to suspend the rules and agree to the concurrent resolution (H. Con. Res. 133) supporting the goals and ideals of a Long-Term Care Awareness Week.

The Clerk read the title of the concurrent resolution.

The text of the concurrent resolution is as follows:

H. CON. RES. 133

Whereas the Department of Health and Human Services has reported that approximately 60 percent of individuals who are over the age of 65 will need some kind of long-term care services and at some point more than 40 percent of such individuals will require nursing home care;

Whereas in 2005 the Government Accountability Office projected that by 2040 the number of individuals in the age group of individuals who are 85 years of age or older, which it finds is the age group most likely to require long-term care services, is projected to increase more than 250 percent from 4,300,000 individuals in 2000 to 15,400,000 individuals;

Whereas the Internet site of the National Clearinghouse for Long-Term Care Information notes that the Medicare program does not generally pay for most long-term care services that are needed and that the Medicare program pays for skilled nursing facility services only after a recent hospital stay, that Medicare beneficiaries generally pay more than \$118 in daily coinsurance begin-

ning on the 21st day of coverage and coverage ends after 100 days, and that the Medicare program does not cover a stay in an assisted living facility or adult day care;

Whereas an AARP study in 2006 found that 59 percent of people in the United States who are 45 years of age or older overestimated the level of coverage under the Medicare program for nursing home care and more than half of such people who are 45 years of age or older indicate they believe such program provides coverage for assisted living, which it does not;

Whereas the 2006 AARP study concludes that given the already high costs related to long-term care and the projected growth in the size of the older population in future years, it is essential for people in the United States to learn more about the costs of long term care, about ways to prepare for and pay for long term care, and State and community resources that are available to assist in these challenges;

Whereas the Government Accountability Office has reported that broad-based misperceptions regarding the Medicare program's level of long-term care coverage significantly contributes to the lack of personal preparation of people in the United States for the financing of long term care and advises that the government can play a significant part in enhancing personal preparedness by educating people in the United States about the scope of coverage of long-term care under public programs such as the Medicare program;

Whereas people in the United States have a right to know what long-term care coverage is available to them so that they are able to make informed retirement choices;

Whereas the first phase of the Department of Health and Human Service's pilot program to raise awareness regarding planning for long-term care obtained a less than 8 percent response rate by consumers requesting information in selected States;

Whereas in 2002 the Government Accountability Office reported that less than 10 percent of the elderly population in the United States and a lower percentage of those aged 55 to 64 years of age in the United States have purchased long-term care insurance;

Whereas the Department of Commerce indicates that savings as a percentage of after tax income declined from approximately eight percent in 1990 to less than zero since 2005;

Whereas in 2005 the Government Accountability Office reported that spending on long-term care services solely for the elderly is projected to grow at least two-and-a-half times and could grow almost four-fold to \$379 billion in 2050;

Whereas the Government Accountability Office has reported that many people in the United States have neared impoverishment by depleting their assets to pay the significant costs of their long-term care;

Whereas AARP reports that an estimated 44,400,000 individuals who are 18 years of age or older provide unpaid care to another adult and others have estimated the value of such unpaid services to be approximately \$257 billion annually;

Whereas advance planning by family members will help to protect caregivers' health, financial security, and quality of life;

Whereas our Nation's long term care challenges will significantly impact women, who make up more than 58 percent of people in the United States who are 65 years of age and older, and greater than two-thirds of people in the United States who are 85 years of age and older;

Whereas encouraging people in the United States to anticipate and plan for their future long-term care needs will help them achieve greater health and financial security, as well

as greater independence, choice, and control over the services they need in the setting of their choice; and

Whereas a long term care awareness week has been observed during the first full week in November, which in 2007 will be the week of November 4th through 10th: Now, therefore, be it

Resolved by the House of Representatives (the Senate concurring), That Congress—

(1) supports the goals and ideals of a Long-Term Care Awareness Week;

(2) encourages the Secretary of Health and Human Services to continue working to educate people in the United States about long-term care; and

(3) urges the people of the United States to recognize such a week as an opportunity to learn more about the potential risks and costs associated with long-term care and the options available to help meet their long-term care needs.

The SPEAKER pro tempore. Pursuant to the rule, the gentlewoman from Wisconsin (Ms. BALDWIN) and the gentleman from New York (Mr. FOSSELLA) each will control 20 minutes.

The Chair recognizes the gentlewoman from Wisconsin.

GENERAL LEAVE

Ms. BALDWIN. Madam Speaker, I ask unanimous consent that all Members may have 5 legislative days to revise and extend their remarks and exclude extraneous material on the concurrent resolution under consideration.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from Wisconsin?

There was no objection.

Ms. BALDWIN. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I rise in support of H. Con. Res. 133, supporting the goals and ideals of a Long-Term Care Awareness Week. Long-term care is an often overlooked part of the continuum of care for many Americans, and many of us find ourselves ill informed and ill prepared to make choices for our own long-term care needs and those of our loved ones.

According to the U.S. Department of Health and Human Services, long-term care represents a variety of services that include medical and nonmedical care for people who have a chronic illness or disability. Most long-term care is to assist people with the activities of daily living, such as dressing, bathing, and using the bathroom. It is important to remember that you may need long-term care at any age. The need for support and health services for persons who have diminished capacity for self-care is projected to strain both public and private resources.

Madam Speaker, H. Con. Res. 133 calls for public education about the need for long-term care so that people of all ages throughout our Nation are better prepared to meet their own long-term care needs. Planning for long-term care requires us to think about possible future health care needs. Making the right decision about long-term care requires us to look at all of the options before us and to make informed decisions.

I want to recognize and thank my colleague from South Dakota (Ms. HERSETH SANDLIN) for introducing this resolution and carrying it to the floor. I urge my colleagues to join me in support of it.

Madam Speaker, I reserve the balance of my time.

Mr. FOSSELLA. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I rise today in support of H. Con. Res. 133, supporting the goals and ideals of a Long-Term Care Awareness Week. As designated, the first week in November is designed as the opportunity to educate Americans on the likelihood of one needing long-term care. Additionally, greater education is needed as to what types of long-term care programs are available and what the various costs of services are. Families should take this opportunity to discuss the options to help plan and pay for their future.

We know the baby boomer generation is now becoming eligible for Social Security, so it is sort of a wake-up call for what it will be, not just for having some financial independence, but what it would be and what it means to take care of dealing with their health care and the notion of rising health care costs. So the sooner one prepares, the better off they will be when they reach that age.

Madam Speaker, health care costs are increasing, people are living longer, and I think we have a real responsibility here to educate constituents who need to become actively involved in ways in which they can provide for their own future of health care, as well as the care of their family member. I stand in support of this and ask my colleagues to support the resolution as well.

Mr. FOSSELLA. Madam Speaker, I reserve the balance of my time.

Ms. BALDWIN. Madam Speaker, I am pleased to yield 4½ minutes to the bill's author, the gentlewoman from South Dakota (Ms. HERSETH SANDLIN).

□ 1645

Ms. HERSETH SANDLIN. Madam Speaker, I rise in support of H. Con. Res. 133, a bipartisan resolution supporting the goals and ideals of Long-Term Care Awareness Week during the week of November 4 through 10, 2007. I would like to thank Chairman DINGELL and committee staff for moving this resolution to the floor, and the gentlewoman from Wisconsin (Ms. BALDWIN) for yielding to me once again.

I would like to urge my colleagues to support this commonsense, bipartisan resolution which I introduced with the gentleman from Louisiana (Mr. BOUSTANY), along with the gentleman from Maine (Mr. ALLEN) and the gentleman from New Jersey (Mr. FERGUSON).

I am proud that this resolution has earned the support of AARP, Families USA, the Alzheimer's Association, the National Council on Aging, the Amer-

ican Council of Life Insurers, the Association of Health Insurance Advisors, and America's Health Insurance Plans. They have come together in recognizing the immediacy of the need to raise awareness about planning for long-term care needs.

This resolution is part of my commitment to addressing the many challenges associated with long-term care. Designating a week to focus on long-term care is one meaningful step we can take.

Our Nation needs to address these issues sooner rather than later so that Americans are anticipating and fully prepared to meet their long-term care needs.

Studies show that many Americans don't have a clear perception of what long-term care costs and to what extent long-term care is covered by public programs.

Experts have projected strong growth and demand for long-term care services as the baby-boom generation grows older and have emphasized the related challenge of paying for long-term care services.

The Department of Health and Human Services has reported that approximately 60 percent of people over the age of 65 will need some kind of long-term care services.

The Government Accountability Office has reported projections of significant growth in spending on long-term care services for seniors such that spending could approach \$379 billion by 2050.

Our Nation's long-term care challenges will have a particularly significant impact on women, who make up more than 58 percent of Americans over the age of 65 and greater than two-thirds of people 85 years of age or older.

Yet when it come to preparing to meet these costs, many Americans are not adequately prepared. For instance, a 2006 AARP survey on the cost of long-term care found that 60 percent of people age 45 and older said they believe Medicare will pay for extended nursing home stay, which it does not. And more than 50 percent of people age 45 or older said they believe Medicare covers assisted living, which it does not.

And private-pay costs for this kind of care continue to go up. In South Dakota, the average cost of a year in a private room in a nursing home is \$53,000, and a double-occupancy room averages well over \$47,000. According to one recent national survey, a year in a private room in a nursing home averages more than \$74,000, and a double-occupancy room averages nearly \$66,000 a year.

An essential step in meeting the challenges posed by long-term care needs and costs is raising awareness about planning for long-term care.

Education will help people understand the likelihood of needing long-term care, the types and costs of available services, and the options to help

plan and pay for those services. The more people know, the greater opportunity people have to plan for their future and the more likely they are to receive the services they need in the setting of their choice.

That's the motivation for this Long-Term Care Awareness Week resolution. I urge my colleagues to support this bipartisan resolution. By passing it today, supporting the goals and ideals of Long-Term Care Awareness Week during the week of November 4 through 10, we can take another step forward to prepare our constituents and the Nation to meet the already high cost of long-term care and the growing challenges ahead.

Mr. FOSSELLA. Madam Speaker, it is my privilege to yield 2 minutes to the lead sponsor and a true champion of this effort in the House, the gentleman from Louisiana (Mr. BOUSTANY).

Mr. BOUSTANY. Madam Speaker, I would like to thank my friend from New York for yielding me this time.

I rise in support of H. Con. Res. 133 because many Americans lack protection from catastrophic long-term care expenses related to chronic illnesses and disability. And worse yet, most families assume that Medicare will actually pay for these long-term care services, while it generally does not; and oftentimes they find out in the midst of a family crisis when a loved one is ill, placing intensive emotional burdens as well as financial burdens on families.

I want to thank my colleague, Congresswoman HERSETH SANDLIN, for working with me on this and really for being a champion on this issue. She and I have worked together, and we have had some success in persuading HHS and Social Security to clarify these widespread perceptions.

I am hopeful that the passage of this resolution will encourage Secretary Leavitt, President Bush and the future administration to discuss this critical retirement security issue with the American people. A recent poll found that the majority of voters want to hear more about plans on how we will deal with this problem, and they desire more information on this. And that perception out there that exists that Medicare covers this is a real problem. The more we can get this information out to the American people, the greater the service we will be doing to help them deal and to cope with these problems.

We clearly must do more to expand coverage for long-term care, to assist family caregivers, particularly those coping with the onset of chronic conditions such as Alzheimer's disease. So I urge my colleagues to support H. Con. Res. 133.

Ms. BALDWIN. Madam Speaker, I reserve the balance of my time.

Mr. FOSSELLA. Madam Speaker, let me commend the gentlelady from South Dakota and the gentleman from Louisiana for bringing this to the floor.

I think what they said is totally accurate in the sense that as our population lives longer and lives more healthy lives, along with that comes an understanding and an obligation to begin preparing for those long-term health care needs as part of their retirement.

As I mentioned before, baby boomers officially begin to receive, for those early retirees, Social Security in just a few months. That population, as we know, is large. I just think the more we can emphasize and educate the people of this country on what their options can and should be as they retire, the better off we will be when that day arrives.

Madam Speaker, I yield back the balance of my time.

Ms. BALDWIN. Madam Speaker, I too want to add my words of congratulations to the bill's authors, the gentlewoman from South Dakota and the gentleman from Louisiana.

I know from my own personal experience you are never fully prepared for having to make some of these choices on behalf of loved ones, and it can happen at any time. We are going to be very well-served by the passage of this bill to increase awareness among people of all age groups about the decisions and options they have. We have to understand that long-term care is part of the continuum of health care in this country. More education is needed. I recommend its passage.

Madam Speaker, I yield back the balance of my time.

The SPEAKER pro tempore (Ms. BERKLEY). The question is on the motion offered by the gentlewoman from Wisconsin (Ms. BALDWIN) that the House suspend the rules and agree to the concurrent resolution, H. Con. Res. 133.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the concurrent resolution was agreed to.

A motion to reconsider was laid on the table.

SENSE OF THE HOUSE REGARDING ESTABLISHMENT OF A NATIONAL CANCER RESEARCH MONTH

Ms. BALDWIN. Madam Speaker, I move to suspend the rules and agree to the resolution (H. Res. 448) expressing the sense of the House of Representatives that there should be established a National Cancer Research Month, and for other purposes.

The Clerk read the title of the resolution.

The text of the resolution is as follows:

H. RES. 448

Whereas the American Association for Cancer Research, the oldest and largest scientific cancer research organization in the United States, was founded on May 7, 1907, at the Willard Hotel in Washington, DC, by a group of physicians and scientists interested in research to further the investigation and spread new knowledge about cancer;

Whereas the American Association for Cancer Research is focused on every aspect of high-quality, innovative cancer research and is the authoritative source of information and publications about advances in the causes, diagnosis, treatment, and prevention of cancer;

Whereas since its founding, the American Association for Cancer Research has accelerated the growth and dissemination of new knowledge about cancer and the complexity of this disease to speed translation of new discoveries for the benefit of cancer patients, and has provided the information needed by elected officials to make informed decisions on public policy and sustained funding for cancer research;

Whereas partnerships with research scientists and the general public, survivors and patient advocates, philanthropic organizations, industry, and government have led to advanced breakthroughs, early detection tools which have increased survival rates, and a better quality of life for cancer survivors;

Whereas our national investment in cancer research has yielded substantial returns in terms of research and advances and lives saved, with a scholarly estimate that every 1-percent decline in cancer mortality saves our national economy \$500,000,000,000;

Whereas cancer continues to be one of the most pressing public health concerns, killing one American every minute, or a dozen people worldwide every 60 seconds;

Whereas the American Association for Cancer Research Annual Meeting on April 14–18, 2007, was the world's largest and most comprehensive gathering of leading cancer researchers, scientists, and clinicians engaged in all aspects of clinical investigations pertaining to human cancer as well as the scientific disciplines of cellular, molecular, and tumor biology; carcinogenesis; chemistry; developmental biology and stem cells; endocrinology, epidemiology, and biostatistics; experimental/molecular therapeutics; immunology; and radiobiology/radiation oncology; imaging; prevention and survivorship research;

Whereas, as part of their Centennial, the American Association for Cancer Research has published "Landmarks in Cancer Research" citing the events or discoveries after 1907 that have had a profound effect on advancing our knowledge of the causes, mechanisms, diagnosis, treatment, and prevention of cancer; these landmarks are intended as an educational, living document, an ever-changing testament to human ingenuity and creativity in the scientific struggle to understand and eliminate the diseases collectively known as cancer;

Whereas more than 60 percent of all cancer occurs in people over the age of 65, and issues relating to the interface of aging and cancer, ranging from the most basic science questions to epidemiologic relationships to clinical and health services research issues, are of concern to society;

Whereas the American Association for Cancer Research is proactively addressing these issues paramount to our aging population through a Task Force on Cancer and Aging, special conferences, and other programs which engage the scientific community in response to this demographic imperative; and

Whereas May would be an appropriate month to recognize as National Cancer Research Month; Now, therefore, be it

Resolved, That—

(1) it is the sense of the House of Representatives that there should be established a National Cancer Research Month to support the American Association for Cancer Research in public education efforts to make cancer research a national and international

priority so that one day the disease of cancer will be relegated to history; and

(2) the House of Representatives—

(A) congratulates the American Association for Cancer Research on its 100-year anniversary: "A Century of Leadership in Science—A Future of Cancer Prevention and Cures";

(B) recognizes the invaluable contributions made by the American Association for Cancer Research and its quest to prevent and cure cancer and save lives through cancer research; and

(C) expresses the gratitude of the people of the United States for the American Association for Cancer Research's contributions and the progress in advancing cancer research.

The SPEAKER pro tempore. Pursuant to the rule, the gentlewoman from Wisconsin (Ms. BALDWIN) the gentleman from New York (Mr. FOSSELLA) each will control 20 minutes.

The Chair recognizes the gentlewoman from Wisconsin.

GENERAL LEAVE

Ms. BALDWIN. Madam Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and include extraneous material on the resolution now under consideration.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from Wisconsin?

There was no objection.

Ms. BALDWIN. Madam Speaker, I rise in support of H. Res. 448, expressing the sense of the House of Representatives that there should be established a National Cancer Research Month.

Preventing and ultimately finding a cure for cancer is a major public health challenge. The resolution before us calls for the establishment of a National Cancer Research Month, a time to bring public awareness of the nearly 200 forms of cancer and bring hope and a cure that cancer research provides. Providing a National Cancer Research Month will remind us that basic, clinical, epidemiological, and behavioral research are integral to identifying causes and developing strategies for prevention, diagnosis, treatment and cures for cancer.

This resolution also highlights the contributions of the American Association for Cancer Research, an organization that has been on the forefront of cancer research for more than 100 years. The American Association for Cancer Research was founded in 1907 by a group of 11 physicians and scientists interested in cancer research.

As the oldest and largest scientific organization in the world focused on every aspect of high quality, innovative cancer research, the American Association for Cancer Research has established a reputation for scientific breadth and excellence as premier researchers in the field.

Today, the American Association for Cancer Research accelerates progress towards the prevention and cure of cancer by promoting research, education, communication, and advocacy

and fostering the exchange of knowledge and new ideas among scientists dedicated to cancer research, providing training opportunities for the next generation of cancer researchers and increasing public understanding of cancer.

On this, their centennial year of service, we commend the work of the American Association for Cancer Research and applaud their effort to make cancer research a national and international priority. We owe a debt of gratitude to organizations like the American Association for Cancer Research for their contributions in advancing the public awareness of cancer and for excellence among its membership in the field of cancer research.

I would like to thank my colleague, the gentleman from Utah (Mr. MATHESON), for his work in raising this important issue, and I urge my colleagues to join me in supporting this resolution.

Madam Speaker, I reserve the balance of my time.

Mr. FOSSELLA. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, it is a dreaded word in the English language, and it is called "cancer." Not a family in America is left unscathed or untouched by cancer and what it means to the families, and very often the terrible outcomes.

If there is a positive light, we know over the last several decades in particular, many health care professionals, organizations and groups have dedicated not just time and money and research, but their true passion to helping find a cure and treat cancer in many different ways.

I know on Staten Island this week we will have the annual breast cancer walk that will attract thousands of people, many of whom are survivors, and many who will work in remembrance and memorial of loved ones.

That is why I join my colleague, the gentlewoman from Wisconsin (Ms. BALDWIN), in support of H. Res. 448, expressing the sense of the House that there should be established a National Cancer Research Month. Perhaps it should be all year. I think it is important to at least acknowledge that National Cancer Research Month be this month.

The purpose of establishing this month is to provide an opportunity to better educate the public in an effort to make cancer research a national priority.

At the NIH, the National Cancer Institute conducts research into cancer in conjunction with numerous other institutes and centers. The NCI alone comprises one-third of the NIH's \$30 billion budget. The work being done at the NIH towards cancer research is invaluable. Establishing a Cancer Research Month can help highlight what is being done by the scientific community and how the public can become involved.

While acknowledging and putting aside this month is important, what is even more important is continuing to support the research of those caring, compassionate health care professionals and researchers who will one day find the cure for all cancers, and that should be our wish and national goal and priority.

Madam Speaker, I reserve the balance of my time.

Ms. BALDWIN. Madam Speaker, I reserve the balance of my time to close.

Mr. FOSSELLA. Madam Speaker, I join my colleague from Wisconsin in supporting the resolution, and ask Members to support the resolution.

Madam Speaker, I yield back the balance of my time.

Ms. BALDWIN. Madam Speaker, in closing, I urge my colleagues to support this bill. As our Nation's researchers continue to move us closer to a cure for cancer, it is important for us to recognize the work that these researchers do. Each piece of research, each project is a vital part of the solution that we will achieve when a cure is discovered. I thank my colleague, Mr. MATHESON, for his work on this issue and urge passage of the resolution.

Mr. BACA. Madam Speaker, I rise today to voice my strong support for H. Res. 448. This bipartisan resolution expresses the sense of the House of Representatives that the United States should establish a National Cancer Research Month.

This year marks the 100th anniversary of the American Association for Cancer Research.

Thanks to research and expanded cancer education, we have more early detectors, preventative measures, and treatments for cancer than ever before.

But we still have a long road ahead of us. The American Cancer Society estimates that in the San Bernardino County alone, nearly 2,500 Americans will die from a cancer-related illness in the upcoming year.

Every American is touched by this horrible disease; thanks to great strides, the number of cancer-related deaths is declining.

Strengthening research and public awareness of cancer will lead to more scientific breakthroughs that can increase survival rates for cancer patients—and give our cancer survivors a better quality of life.

I urge my colleagues to cast a vote for hope, and to support this vital resolution.

□ 1700

Ms. BALDWIN. Madam Speaker, I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentlewoman from Wisconsin (Ms. BALDWIN) that the House suspend the rules and agree to the resolution, H. Res. 448.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the resolution was agreed to.

A motion to reconsider was laid on the table.

SUPPORTING THE GOALS AND IDEALS OF NATIONAL IDIOPATHIC PULMONARY FIBROSIS AWARENESS WEEK

Ms. BALDWIN. Madam Speaker, I move to suspend the rules and agree to the concurrent resolution (H. Con. Res. 182) recognizing the need to pursue research into the causes, a treatment, and an eventual cure for idiopathic pulmonary fibrosis, supporting the goals and ideals of National Idiopathic Pulmonary Fibrosis Awareness Week, and for other purposes.

The Clerk read the title of the concurrent resolution.

The text of the concurrent resolution is as follows:

H. CON. RES. 182

Whereas idiopathic pulmonary fibrosis is a serious lung disorder causing progressive, incurable lung scarring;

Whereas idiopathic pulmonary fibrosis is one of about 200 disorders called interstitial lung diseases;

Whereas idiopathic pulmonary fibrosis is the most common form of interstitial lung disease;

Whereas idiopathic pulmonary fibrosis is a debilitating and generally fatal disease marked by progressive scarring of the lungs, causing an irreversible loss of the lung tissue's ability to transport oxygen;

Whereas idiopathic pulmonary fibrosis progresses quickly, often causing disability or death within a few short years;

Whereas there is no proven cause of idiopathic pulmonary fibrosis;

Whereas more than 128,000 United States citizens have idiopathic pulmonary fibrosis, and more than 48,000 new cases are diagnosed each year representing a 156-percent increase in mortality since 2001;

Whereas idiopathic pulmonary fibrosis is often misdiagnosed or under diagnosed;

Whereas the median survival rate for idiopathic pulmonary fibrosis patients is 2 to 3 years; about two-thirds of idiopathic pulmonary fibrosis patients die within 5 years; and approximately 40,000 patients die each year; and

Whereas a need has been identified to increase awareness and detection of this misdiagnosed and under diagnosed disorder as well as all incarnations of pulmonary fibrosis: Now, therefore, be it

Resolved by the House of Representatives (the Senate concurring), That the Congress—

(1) recognizes the need to pursue research into the causes, a treatment, and an eventual cure for idiopathic pulmonary fibrosis;

(2) supports the work of advocates and organizations in educating, supporting, and providing hope for individuals who suffer from idiopathic pulmonary fibrosis, including efforts to organize a National Idiopathic Pulmonary Fibrosis Awareness Week;

(3) supports the designation of an appropriate week as National Idiopathic Pulmonary Fibrosis Awareness Week;

(4) welcomes the issuance of a proclamation designating a National Idiopathic Pulmonary Fibrosis Awareness Week;

(5) congratulates advocates and organizations for their efforts to educate the public about idiopathic pulmonary fibrosis, while funding research to help find a cure for this disorder; and

(6) supports the goals and ideals of National Idiopathic Pulmonary Fibrosis Awareness Week.

The SPEAKER pro tempore. Pursuant to the rule, the gentlewoman from

Wisconsin (Ms. BALDWIN) and the gentleman from New York (Mr. FOSSELLA) each will control 20 minutes.

The Chair recognizes the gentlewoman from Wisconsin.

GENERAL LEAVE

Ms. BALDWIN. Madam Speaker, I ask unanimous consent that all Members may have 5 legislative days to revise and extend their remarks and include extraneous material on the resolution now under consideration.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from Wisconsin?

There was no objection.

Ms. BALDWIN. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I rise in strong support of H. Con. Res. 182, recognizing the need to pursue research into the causes, treatment and eventual cure for idiopathic pulmonary fibrosis, IPF, supporting the goals and ideals of National Idiopathic Pulmonary Fibrosis Week, and for other purposes.

IPF is a debilitating and generally fatal disease which afflicts more than 128,000 Americans, with more than 48,000 new cases diagnosed each year. IPF is often undiagnosed or misdiagnosed and is a disease marked by progressive scarring of the lungs, causing an irreversible loss of the lung tissue's ability to transport oxygen.

The legislation before us today recognizes the need to pursue research into the causes of IPF. H. Con. Res. 182 expresses support for the work of advocates and organizations in educating, supporting and providing hope for individuals who suffer from the disease and supports the designation of National Idiopathic Pulmonary Fibrosis Awareness Week.

This is an important piece of legislation, and I would like to commend my colleague and friend Mr. DEAL for all of his hard work on this issue. I urge my colleagues to join me in support of this resolution.

Madam Speaker, I reserve the balance of my time.

Mr. FOSSELLA. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I join my colleague from Wisconsin in urging the support of H. Con. Res. 182 and at the outset commend our colleague Mr. DEAL from Georgia for introducing the resolution.

We all knew and remember Charlie Norwood who served in this House with honor and distinction, and those who knew Charlie Norwood well knew he was a fighter, passionate about his constituents, his belief, and passionate about this country, and many fights he won. But the fight he did not win was when he was diagnosed with a serious lung disorder in 1998 called, shortly, IPF.

He received a single lung transplant but passed away in February of this year and for that we miss him.

IPF is a progressive and generally fatal lung disease. It's marked by de-

bilating scarring of delicate lung tissue and hinders the lungs' ability to transport oxygen to vital organs. 40,000 people, 40,000 Americans will die this year from IPF, and there's no cure or treatment for this debilitating irreversible disease. Far too many of those with IPF face severe disability or death within a few short years, and we saw that progression here with our colleague Mr. Norwood.

The purpose of this resolution is to bring awareness to the severity of this devastating disease. Additionally, the resolution will support the goals of the National Idiopathic Pulmonary Fibrosis Awareness Week and encourage the work being done by the Coalition for Pulmonary Fibrosis and partner organizations in educating the public about IPF.

40,000 people die in a year, Madam Speaker. We should do what we can to bring attention and education and awareness to ensure it doesn't happen.

Madam Speaker, I reserve the balance of my time.

Ms. BALDWIN. Madam Speaker, I am delighted to yield 5 minutes to my friend and colleague from Washington State (Mr. BAIRD).

Mr. BAIRD. Madam Speaker, I thank the gentlelady, and I thank my colleague from New York as well.

My colleague from New York did a very nice job of honoring our dear friend Charlie Norwood who perished of this disease. My interest comes from the fact that my father died of the disease, and I want to also talk about MIKE CASTLE who has been a strong supporter of this legislation. Mike lost a sister and a brother to this disease.

What I would share with people is imagine getting a diagnosis for a disease you may never have heard of, for which there is no known cause and no known treatment, but it will be fatal. That's IPF, and as the gentleman from New York pointed out, it is estimated that the deaths, at least by some sources, that the deaths caused by IPF on an annual basis exceed the number of breast cancer deaths in this country. But my understanding is NIH currently allocates about \$14 million total to research on IPF.

So we have a disease that is growing in prevalence, that is fatal, that we have no known cause and no known cure of, and it has claimed the life of one of our dear colleagues here and the family members of Members of the Congress. That's why we've introduced this resolution.

I want to commend families and friends from the Coalition for Pulmonary Fibrosis who were here a couple of weeks ago on Capitol Hill lobbying in support of this legislation. I'm pleased to see our leadership bring this up.

We would hope that this is a first step. Our hope is that by increasing the awareness of our colleagues here in Congress and of the American public that we can not only increase awareness of the disease but begin to work

towards actual dedicated funding for this.

This is a cruel illness. Anyone who has seen a family member suffer from it has seen the actually rather desperate effort to try to simply breathe, and that's what happens when your lungs scar up and one goes from a stage of diagnosis where you have a little shortness of breath. Then you begin to need oxygen, to then you flat just cannot breathe and you die of this thing. There are a host of other complications that happen along the way that are not particularly pleasant, to say the least.

So I want to urge my colleagues to support this resolution, and I would urge them to look forward to ways that we can actually do more to actually identify the causes. There is believed to be some genetic component. I know of one woman who has had five family members die of the same illness. We don't know whether that is the cause of all cases. We don't know how it's passed on.

But this is the kind of illness that is killing a number of our friends, now one of our colleagues and many family members of Members of Congress right here. So I urge my colleagues to support the resolution.

I thank the gentleman from New York. I thank the gentlelady from Wisconsin, and I particularly want to commend NATHAN DEAL who was one of Charlie Norwood's closest friends. It's very personal for NATHAN. Obviously, it's personal for myself and MIKE CASTLE. I would urge passage, and I thank the gentlelady.

Mr. FOSSELLA. Madam Speaker, let me just in closing commend Mr. BAIRD for his advocacy. I can only imagine what it meant to him and his family in seeing the passing of his dad from this dreaded illness.

So in his honor and that of Mr. CASTLE, Mr. Norwood and especially practically 40,000 fellow Americans, it's so important to solve the problem, to acknowledge it exists, and become aware and educated on how to solve it.

Let's not just acknowledge and become more aware, but give the resources and funding and support those who ultimately want to find a cure.

Madam Speaker, with that, I yield back the balance of my time.

Ms. BALDWIN. Madam Speaker, in closing, I think my colleagues have most eloquently made the case for support of this resolution.

IPF is a debilitating disease and increased awareness will certainly move us closer to finding the answers to the many unanswered questions surrounding IPF.

Again, I commend my colleague Mr. DEAL for his authorship and urge passage of this resolution.

Madam Speaker, I yield back the remainder of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentlewoman from Wisconsin (Ms. BALDWIN) that the House suspend the rules and agree to the concurrent resolution, H. Con. Res. 182.

The question was taken.

The SPEAKER pro tempore. In the opinion of the Chair, two-thirds being in the affirmative, the yeas have it.

Ms. BALDWIN. Madam Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX and the Chair's prior announcement, further proceedings on this motion will be postponed.

EXPRESSING THE SENSE OF THE HOUSE OF REPRESENTATIVES WITH RESPECT TO DIAMOND-BLACKFAN ANEMIA

Ms. BALDWIN. Madam Speaker, I move to suspend the rules and agree to the resolution (H. Res. 524) expressing the sense of the House of Representatives with respect to Diamond-Blackfan Anemia, as amended.

The Clerk read the title of the resolution.

The text of the resolution is as follows:

H. RES. 524

Whereas Diamond-Blackfan Anemia ("DBA") is a rare genetic bone marrow failure disorder affecting children and adults, 90 percent of whom are younger than 1 year of age when they are diagnosed, and results in severe anemia due to failure to produce red blood cells;

Whereas individuals and families suffering with rare diseases such as DBA not only face the challenges of their debilitating and life-threatening diseases, but must also confront the consequences of their rare disease status;

Whereas individuals suffering from rare diseases need access to treatment options and the potential for a cure;

Whereas research is proving the study of complex, rare diseases such as DBA yield tremendous advancements in other, larger disease areas that affect millions of Americans;

Whereas the children living with DBA have an increased risk of leukemia, solid tumors, and complete bone marrow failure, and 50 percent of patients with DBA are born with birth defects including abnormalities to the face, head, upper arm and hand, genitourinary, and heart with 21 percent of affected patients having more than 1 defect;

Whereas the study of DBA will yield the true incidence of aplastic anemia, myelodysplastic syndrome, leukemia, and the predisposition to cancer in DBA and will serve as an important model for understanding the genetics of birth defects;

Whereas treatments for DBA, including the use of steroids (such as prednisone) and blood transfusions, have potential long-term side effects, including osteoporosis, impaired growth because of the steroids, diabetes, and iron overload because of the transfusions;

Whereas the only cure for DBA is a bone marrow transplant, a procedure that carries serious risks and, since most patients lack an acceptable donor, is an option available for only about 25 percent of patients;

Whereas rare diseases, such as DBA, benefit greatly from well-established comprehensive care centers such as the DBA Comprehensive Clinical Care Center at Schneider Children's Hospital in New Hyde Park, New York (the "Center"), which has become the multidimensional hub for the care and treatment of DBA patients across the country, as well as the home of the DBA Patient Registry which has become a valu-

able national resource for investigators utilizing the Center to accomplish research in a multitude of areas not specific only to DBA;

Whereas the successful establishment of the Center became a model for how to diagnose, treat, and improve the lives of patients with rare diseases, while learning from the disorder to yield advancements in other areas of disease research;

Whereas the success of the initial Center prompted the Centers for Disease Control and Prevention's DBA Public Health Outreach and Surveillance Program to establish 3 additional DBA Centers in Texas, California, and Massachusetts to further patient access to information, treatment, and care by DBA experts, which has resulted in a doubling of patient care visits for DBA care and surveillance since their establishment;

Whereas the DBA Public Health Outreach and Surveillance Program at the Centers for Disease Control and Prevention ("CDC") has resulted in the completion of the first CDC brochure for the DBA patient population, the introduction of a DBA hotline and dedicated DBA nurse, and has resulted in a 25-percent increase of enrollment of DBA patients into the DBA Patient Registry in the first 2 years of the program;

Whereas the collaboration between the National Institutes of Health and the Centers for Disease Control and Prevention and their close collaboration with the Daniella Maria Arturi Foundation and the DBA Foundation have driven the many recent successes in the DBA field and serve as a model for addressing rare disease research efforts through close public and private collaboration to achieve the highest levels of success in the areas of improved patient care and disease research;

Whereas the interagency collaboration achieved within the National Institutes of Health between the National Heart, Lung, and Blood Institute, the National Institute of Diabetes and Digestive and Kidney Diseases, the National Cancer Institute, and the Office of Rare Diseases to advance the research and understanding of DBA has resulted in significant advancements not only in the DBA scientific arena, but in understanding its many links to more prevalent disorders; and

Whereas the DBA research initiatives have already yielded tremendous success including the discovery of 2 ribosomal protein ("RP") genes and the identification that DBA is the first human disease linked to a ribosomal protein problem which, as a fundamental unit of cellular function, has been implicated in a wide range of human disorders including cancer, making this discovery a profound example of the additional benefits that may result from the study of DBA: Now, therefore, be it

Resolved, That the House of Representatives—

(1) recognizes that the identification of Diamond-Blackfan Anemia ("DBA") may advance the understanding of DBA, identify implications of cancer predisposition, and serve as an important model for understanding human development and the molecular basis for certain birth defects;

(2) recognizes the importance of comprehensive care centers in providing complete care and treatment for each patient, leading to an increase in correct and early diagnosis;

(3) commends Schneider Children's Hospital for providing the first DBA Comprehensive Clinical Care Center for patients across the country, for developing the DBA Patient Registry which has proven a robust surveillance tool to understand the epidemiology, biology, and treatment of DBA, and for providing a valuable resource for investigators at a national level, working to understand DBA's

link to more prevalent disorders facing Americans;

(4) commends the Daniella Maria Arturi Foundation and the Diamond-Blackfan Anemia Foundation for their efforts to facilitate the successful collaboration among the National Institutes of Health and the Centers for Disease Control and Prevention to achieve a successful multidisciplinary approach between clinical and scientific DBA efforts with the goal of shortening the life cycle of success realized between the laboratory and applied patient care; and

(5) encourages research efforts to further understand ribosomal protein deficiencies in rare inherited diseases and to advance the treatment options available to those with DBA.

The SPEAKER pro tempore. Pursuant to the rule, the gentlewoman from Wisconsin (Ms. BALDWIN) and the gentleman from New York (Mr. FOSSELLA) each will control 20 minutes.

The Chair recognizes the gentlewoman from Wisconsin.

GENERAL LEAVE

Ms. BALDWIN. Madam Speaker, I ask unanimous consent that all Members have 5 legislative days to revise and extend their remarks and include extraneous material on the resolution under consideration.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from Wisconsin?

There was no objection.

Ms. BALDWIN. Madam Speaker, I yield myself such time as may consume.

I rise in support of H. Res. 524, expressing the sense of the House with respect to Diamond-Blackfan anemia, DBA.

DBA is a rare genetic bone marrow disorder affecting children and adults, 90 percent of whom are younger than 1 year of age when they are diagnosed. DBA results in severe anemia due to the failure to produce red blood cells. The symptoms may vary greatly, from very mild to severe and life-threatening. Unfortunately, because DBA is a rare disease, there is limited research being done, and treatment options are not optimal.

The resolution before us today as amended expresses the sense of the House of Representatives that we should encourage further efforts to clarify the natural history of DBA, continue efforts to raise awareness and ease access of information about DBA, encourage research efforts that will advance treatment options and seek a cure and encourage cross-institutional research initiatives to study the intricacies involved in this rare inherited disease.

This is an important piece of legislation, and I would like to acknowledge and thank my colleague Representative CAROLYN MCCARTHY for her hard work and dedication on this issue. I urge all of my colleagues to join me in support of this legislation.

Madam Speaker, I reserve the balance of my time.

Mr. FOSSELLA. Madam Speaker, I yield myself such time as I may consume.

Let me join my colleague from Wisconsin in supporting H. Res. 524 and also acknowledging again at the outset the work and efforts of my colleague from New York (Mrs. MCCARTHY).

As was mentioned, the resolution recognizes the elements of the Diamond-Blackfan anemia and the research being done on the disease.

DBA is a blood condition, as mentioned, present at birth which is characterized by failure of the bone marrow to produce red blood cells, and unlike other types of anemia, DBA relates to a bone marrow failure. It's been the result of a genetic mutation and has generally been diagnosed at birth.

The purpose of this resolution is to bring awareness to this disease and the research and education surrounding Diamond-Blackfan anemia. As is always the case, although the word is rare and operative, the point is if somebody is suffering from DBA they're suffering, and just because there may not be tens of thousands a year, the fact is that suffering doesn't go away.

So I would urge the adoption.

Madam Speaker, I reserve the balance of my time.

Ms. BALDWIN. Madam Speaker, I am now proud to yield 5 minutes to my colleague, the author of this resolution, the gentlelady from New York (Mrs. MCCARTHY).

Mrs. MCCARTHY of New York. Madam Speaker, I'd like to thank my colleague Ms. BALDWIN for her support, and I'd also like to thank my colleague from New York, VITO FOSSELLA, for taking a strong stance on this issue.

I also want to say that this bill would not have made it to the floor without the help of my good friend and colleague, Congressman PALLONE from New Jersey, for his support in bringing it up.

It was mentioned that Diamond-Blackfan anemia, or DBA, is a rare genetic bone marrow failure disorder that affects children and adults, stopping the body's ability to produce red blood cells.

A lot of our colleagues might remember, every year I go around and ask all of my colleagues to sign a book so that I can have the opportunity to teach my colleagues about DBA, so as we go down the road mostly hopefully to get more research money.

Ninety percent of those suffering this disease were younger than 1 year old when they were diagnosed. Children living with DBA have an increased risk of leukemia, solid tumors, and complete bone marrow failure. Fifty percent of patients with DBA are also born with birth defects, including abnormalities to the face, head, upper arm and hand, and heart. Twenty-one percent of affected patients suffer from more than one defect.

The individuals and families suffering from rare diseases such as DBA not only face the challenges of their life-threatening diseases, but they must also confront the limited treatment and the research options.

Researchers believe that the study of DBA will yield clues to several other widespread diseases, providing valuable insights into the biology of blood disorders, blood cell formation, leukemia, and serve as an important model for understanding the genetics of birth defects.

Unfortunately, many of the long-term treatments for DBA have the potential for serious side effects, including impaired growth, diabetes, and iron overload.

The only cure for DBA is a bone marrow transplant, a procedure that carries serious risks. And since most patients lack an acceptable donor, it's an option available for only about 25 percent of the patients.

□ 1715

Rare diseases, such as DBA, where there are no regional or ethnic trends and a small number of patients, make progress in treatment and research difficult. Thankfully, there are centers across the Nation that devote countless hours into understanding this disease. One such center is based out of my district on Long Island. The DBA Comprehensive Clinical Care Center at Schneider Children's Hospital in New Hyde Park, New York, has become the hub for the care and treatment of DBA patients across the country. The facility is also home of the DBA Patient Registry, which has become a valuable national resource for families and the researchers.

The success made at Schneider's Children's Hospital have prompted the Centers for Disease Control and Prevention's DBA Public Health Outreach and Surveillance Program to establish three additional DBA centers in Texas, California, and Massachusetts to further patient access, information, treatment, and care by DBA experts. This has resulted in a doubling of patient care visits for DBA since their establishment.

The effects are also felt on a national level. The CDC has dedicated resources and manpower to the study of DBA as well as patient outreach. Because of these efforts, we have seen a 25 percent increase of enrollment of DBA patients into the DBA Patient Registry in the first 2 years of the program. The collaboration achieved through Federal programs such as NIH and the CDC and private groups such as the Daniela Maria Arturi Foundation and the DBA Foundation have driven the many recent successes in the DBA field. This partnership should serve as a model for addressing rare disease research efforts through close public and private manners. I have been working with the Arturi family for many years. Their daughter Daniela was affected by this rare disease, and they have been the vocal voices for increased funding for research and treatment. Today, we in Congress will give them and all families suffering from this rare disease a chance of hope.

Let me say that we hear constantly of these very rare diseases, and the

families sometimes feel they have no hope. I would encourage them to reach out on the Internet to find the information they need to. The foundation that was started 10 years ago has come such a long way where researchers from across the world now come in for a conference every year to find out more and what work has been done. And even though the cure for DBA has not happened yet, the other research has helped many, many other families. So, please, join me in supporting this resolution and telling the families and the children with DBA that they are not alone. I ask my colleagues to support H. Res. 524.

Mr. FOSSELLA. Madam Speaker, I reserve the balance of my time.

Ms. BALDWIN. Madam Speaker, I am pleased to yield 2 minutes to my colleague from New York, Congressman BISHOP.

Mr. BISHOP of New York. Madam Speaker, I rise in strong support and as a proud cosponsor of this resolution, recognizing the importance of the Federal Government's continued support for research into the rare bone marrow failure disorder for which there is no known cure known as Diamond-Blackfan anemia.

I am very proud to represent Manny and Maria Arturi of Remsenberg, NY, located in my district. After the loss of their daughter Daniela Maria nearly 12 years ago, the foundation they created and that bears her name continues making great strides toward the ultimate goal of finding a cure.

When a tragic disorder like this strikes infants within the first year of their lives, it is all the more important for Congress to go on record voicing our unwavering support to raise awareness and broaden support for funding rare disease research. Accordingly, this resolution demonstrates we support giving experienced doctors the resources for the most complete care for those patients. And by encouraging the National Institutes of Health and Centers for Disease Control to coordinate a multidisciplinary approach toward a cure, this legislation brings hope that other parents will be spared from the kind of devastation felt by the Arturis once they learned of their child's diagnosis.

Therefore, Madam Speaker, I encourage my colleagues to support this resolution as well as other measures that will ultimately bring about a cure for Diamond-Blackfan anemia.

Mr. FOSSELLA. Madam Speaker, let me again congratulate Mrs. MCCARTHY for bringing this to the floor, and constantly, not just here but constantly bringing attention to DBA.

Whenever a parent gets bad news on a child and an illness, you know it takes to the heart. And there are so many innovative, wonderful, compassionate health care professionals who try to bring a level of comfort to those families, and I know that here in Congress we do the same and try to bring awareness. And although rare, or rarer

than many illnesses, nevertheless, the pain and suffering remains the same.

I yield back the balance of my time.

Ms. BALDWIN. Madam Speaker, Diamond-Blackfan anemia is such a serious condition; and because it is such a rare disease, there is a real need for increased awareness and research. I commend my colleague Mrs. MCCARTHY for her advocacy on this issue, and I urge my colleagues to support the resolution.

I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentlewoman from Wisconsin (Ms. BALDWIN) that the House suspend the rules and agree to the resolution, H. Res. 524, as amended.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the resolution, as amended, was agreed to.

A motion to reconsider was laid on the table.

DEXTROMETHORPHAN DISTRIBUTION ACT OF 2007

Ms. BALDWIN. Madam Speaker, I move to suspend the rules and pass the bill (H.R. 970) to amend the Federal Food, Drug, and Cosmetic Act with respect to the distribution of the drug dextromethorphan, and for other purposes, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 970

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 "Dextromethorphan Distribution Act of 2007".

SEC. 2. RESTRICTIONS ON DISTRIBUTION OF BULK DEXTROMETHORPHAN.

The Federal Food, Drug, and Cosmetic Act (21 U.S.C. 321 et seq.) is amended—

(1) in section 501, by inserting at the end the following:

“(j) If it is unfinished dextromethorphan and is possessed, received, or distributed in violation of section 506D.”; and

(2) by inserting after section 506C the following:

“SEC. 506D. RESTRICTIONS ON DISTRIBUTION OF BULK DEXTROMETHORPHAN.

“(a) RESTRICTIONS.—No person shall—

“(1) possess or receive unfinished dextromethorphan, unless the person is registered under section 510; or

“(2) distribute unfinished dextromethorphan to any person other than a person registered under section 510.

“(b) EXCEPTION FOR COMMON CARRIERS.—This section does not apply to a common carrier that possesses, receives, or distributes unfinished dextromethorphan for purposes of distributing such unfinished dextromethorphan between persons registered under section 510.

“(c) DEFINITIONS.—In this section:

“(1) The term ‘common carrier’ means any person that holds itself out to the general public as a provider for hire of the transportation by water, land, or air of merchandise, whether or not the person actually operates the vessel, vehicle, or aircraft by which the transportation is provided, between a port or place and a port or place in the United States.

“(2) The term ‘unfinished dextromethorphan’ means dextromethorphan that is not contained in a drug that is in finished dosage form.”.

The SPEAKER pro tempore. Pursuant to the rule, the gentlewoman from Wisconsin (Ms. BALDWIN) and the gentleman from New York (Mr. FOSSELLA) each will control 20 minutes.

The Chair recognizes the gentlewoman from Wisconsin.

GENERAL LEAVE

Ms. BALDWIN. Madam Speaker, I ask unanimous consent that all Members have 5 legislative days to revise and extend their remarks and include extraneous material on the bill under consideration.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from Wisconsin?

There was no objection.

Ms. BALDWIN. Madam Speaker, I yield myself such time as I may consume.

I rise in support of H.R. 970, the Dextromethorphan Distribution Act of 2007.

Dextromethorphan, commonly known as DXM or DEX, is an active ingredient in many over-the-counter cough and cold medications. When used as directed, DEX has proven to be an effective cough suppressant; but sadly, an alarming number of teenagers and young adults are abusing prescription and over-the-counter medications by taking much larger than recommended doses to get high.

H.R. 970 attempts to curb the misuse and abuse of DEX by restricting the sale, purchase, trade, and distribution of DEX to registered producers of drugs and devices. The legislation is aimed at preventing would-be drug dealers from purchasing DEX wholesale and selling it over the Internet and on the streets.

Similar legislation passed the House during the 109th Congress but was not enacted into law. Today, we renew our commitment to America's young people by passing this legislation. We are also reminding parents and guardians to remain vigilant in the often difficult task of talking with our young people about drug misuse and abuse. Even if your child does not abuse products containing DEX or any other over-the-counter medications, odds suggest that they know somebody who does.

I want to acknowledge and commend our colleagues, particularly Congressman FRED UPTON and Congressman RICK LARSEN, for their committed work on this issue, and I urge my colleagues to support H.R. 970.

Madam Speaker, I reserve the balance of my time.

Mr. FOSSELLA. Madam Speaker, I am proud to rise in favor along with my colleague from Wisconsin and support H.R. 970. At the outset, I would also like to thank Mr. UPTON of Michigan and Mr. LARSEN of Washington for their work on this important legislation. Mr. UPTON in particular has been a true champion and is one of the reasons why we are here.

Dextromethorphan, or DXM or DEX as it is sometimes called, is an ingredient found in cough medicine. The ingredient relieves the coughing associated with the cold or flu, which is a positive, and cough medicines containing this drug are common and can be obtained without prescription, as we all know. While the drug is safe and effective, it is also dangerous if too much is taken.

Reports have shown that some segments of the population, particularly young people, will take large amounts of this medicine in an attempt to absorb large amounts of DXM to get high. The abuse of this drug can cause death as well as other serious adverse events, such as brain damage, seizure, loss of consciousness, and irregular heartbeat.

Madam Speaker, at this point, I yield to my colleague and a true champion of this, Mr. UPTON, for 4 minutes.

Mr. UPTON. Madam Speaker, I also want to compliment our fine Reading Clerk for getting the pronunciation of dextromethorphan correct. I know she has been practicing for days, as many of us have.

But I too rise in strong support of this bill, H.R. 970, the Dextromethorphan Distribution Act. I am going to call it DXM, of 2007, legislation that I introduced with my friend and colleague Mr. RICK LARSEN of Washington. He has been absolutely a champion as we have worked this issue on both sides of the aisle to restrict the distribution of this product to entities registered with the FDA.

I want to thank the House leadership for scheduling this bill; I want to thank my friend and chairman, Mr. DINGELL of our committee, as well as Mr. BARTON, the ranking member, as well as the chairman and ranking member of the Energy and Commerce Health Subcommittee for allowing this bill in fact to come to the floor, not only in this session but in the last session of Congress as well. When we did pass it on the House floor, I think it was actually one of the last bills that was passed in the 109th Congress in the House, but the Senate failed us at the end. We are hoping that by passing it at this point the Senate, in fact, will move together.

I also want to thank my staff, particularly Jane Williams, who has sat in countless meetings as we have worked and finessed this legislation, not only the industry folks here, but obviously with House and Senate leaders on both sides of the Capitol.

This drug normally is a safe and effective nonnarcotic cough suppressant that is used in many over-the-counter cough and cold medicines. While medicines containing DXM are used safely and effectively by millions of Americans every year, taken in extremely large quantities this drug produces a high that can cause brain damage, seizure, and obviously death.

Studies have shown that teenagers are obtaining unfinished DXM on the Internet to get high by consuming

large amounts or mixing it with alcohol. And already there have been too many deaths linked to the abuse of pure DXM. According to the DEA, abuse among adolescents is increasing. Abuse of DXM has been found in several forms, but has been increasingly found in an encapsulated powder form which is now being sold over the Internet. Currently, there are no restrictions, none, on the restriction of raw bulk dextromethorphan, and this bill would help to ensure that DXM is used only for legitimate purposes and stays out of the hands of drug dealers and adolescents. FDA would have the authority to seize bulk dextromethorphan if found in the possession of anyone not authorized to have it, and those measures would cut off the supply chain of unfinished DXM to those purchasing it on the Internet to get high or to sell it as a street drug.

This bill has been endorsed by the American Pharmacists Association, the Consumer Healthcare Products Association, the Food Marketing Institute, the National Association of Chain Drug Stores and Partnership for a Drug-Free America.

As the parent of two teenagers, I am certainly alarmed by the number of teens who are abusing cough syrup and pure DXM to get a high. They are under the false impression that getting high off this drug is harmless because it is an ingredient in cough syrup. Nothing can be further from the truth. Our kids are playing a game of Russian roulette every time they get high off this drug, and sooner or later someone will die, as they have already. Enough is enough.

This commonsense bipartisan piece of legislation will certainly put an end to the bulk sale of DXM on the Internet and will keep our kids safe from the dangers of this type of drug abuse. I hope that all of our colleagues can support this even on a voice vote, and I hope and pray that the Senate will take action as soon as they can so that we can get this bill to the President's desk where I expect him to sign it.

Ms. BALDWIN. Madam Speaker, I reserve the balance of my time.

Mr. FOSSELLA. Madam Speaker, let me again commend Mr. LARSEN, and of course Mr. UPTON and my colleague from Wisconsin, and urge the adoption.

I yield back the balance of my time.

Ms. BALDWIN. Madam Speaker, I want to state that this bill and its passage will certainly begin to curb the abuse of dextromethorphan. I would like to thank the gentleman also for his leadership on this bill and that of Mr. RICK LARSEN's. This will begin a process of educating about the harm that such abuse of over-the-counter drugs can cause, and I urge my colleagues to join me in supporting this bill.

Mr. LARSEN of Washington. Madam Speaker, our society tends to think of drugs only as illicit, illegal products sold on the street. Yet there are other dangers closer to home, in our

own medicine cabinets and a click of the mouse away. Common household products, such as cough syrup, contain ingredients that can provide a high if taken in large enough doses.

The Partnership for a Drug Free America estimates that 1 in 10 teenagers or approximately 2.4 million young people have intentionally abused cough medicine in order to get high. The primary active ingredient in most cough medicines is dextromethorphan, also known as DXM.

While medicines containing DXM are used safely by millions of Americans each year, some teenagers are taking excessive amounts of over-the-counter cough medications in order to get high. Moreover, many teens are abusing the unfinished, pure form of DXM which under current law can be obtained legally over the Internet.

Pure DXM is extremely dangerous when taken in large amounts, and can cause hallucinations, seizures, brain damage, and even death. In 2005, two teenagers in my district died from overdosing on unfinished DXM, which they had obtained from a company over the Internet. In the same year three boys from Virginia and Florida died as a result of abusing unfinished DXM, which they had acquired through the same means. The loss of these children is a tragedy that will forever be felt by their families and their communities.

There is no need to risk the reoccurrence of these tragic events in the future. H.R. 970, the Dextromethorphan Distribution Act, will prohibit the distribution of unfinished DXM to anyone not registered to possess it. It will cut off the supply of unfinished DXM to those looking to use it to get high or sell it as a street drug.

This commonsense legislation will eliminate the abuse of unfinished DXM, while still allowing drug manufacturers and registered pharmacists to use the substance as it was intended.

I would like to thank my friend and colleague FRED UPTON for his leadership on this issue, and I applaud the House leadership for sending this bill to the House floor. I urge the Senate to act quickly to turn this commonsense bill into law.

Ms. BALDWIN. I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentlewoman from Wisconsin (Ms. BALDWIN) that the House suspend the rules and pass the bill, H.R. 970, as amended.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill, as amended, was passed.

A motion to reconsider was laid on the table.

□ 1730

VISION CARE FOR KIDS ACT OF 2007

Ms. BALDWIN. Madam Speaker, I move to suspend the rules and pass the bill (H.R. 507) to establish a grant program to provide vision care to children, and for other purposes, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 507

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 "Vision Care for Kids Act of 2007".

SEC. 2. FINDINGS.

Congress makes the following findings:

(1) Millions of children in the United States suffer from vision problems, many of which go undetected. Because children with vision problems can struggle developmentally, resulting in physical, emotional, and social consequences, good vision is essential for proper physical development and educational progress.

(2) Vision problems in children range from common conditions such as refractive errors, amblyopia, strabismus, ocular trauma, and infections, to rare but potentially life- or sight-threatening problems such as retinoblastoma, infantile cataracts, congenital glaucoma, and genetic or metabolic diseases of the eye.

(3) Since many serious ocular conditions are treatable if identified in the preschool and early school-age years, early detection provides the best opportunity for effective treatment and can have far-reaching implications for vision.

(4) Various identification methods, including vision screening and comprehensive eye examinations required by State laws, can be helpful in identifying children needing services. A child identified as needing services through vision screening should receive a comprehensive eye examination followed by subsequent treatment as needed. Any child identified as needing services should have access to subsequent treatment as needed.

(5) There is a need to increase public awareness about the prevalence and devastating consequences of vision disorders in children and to educate the public and health care providers about the warning signs and symptoms of ocular and vision disorders and the benefits of early detection, evaluation, and treatment.

SEC. 3. GRANTS REGARDING VISION CARE FOR CHILDREN.

(a) *IN GENERAL.*—The Secretary of Health and Human Services (referred to in this section as the "Secretary"), acting through the Director of the Centers for Disease Control and Prevention, may award grants to States on the basis of an established review process for the purpose of complementing existing State efforts for—

(1) providing comprehensive eye examinations by a licensed optometrist or ophthalmologist for children who have been previously identified through a vision screening or eye examination by a licensed health care provider or vision screener as needing such services, with priority given to children who are under the age of 9 years;

(2) providing treatment or services, subsequent to the examinations described in paragraph (1), necessary to correct vision problems; and

(3) developing and disseminating, to parents, teachers, and health care practitioners, educational materials on recognizing signs of visual impairment in children.

(b) *CRITERIA AND COORDINATION.*—

(1) *CRITERIA.*—The Secretary, in consultation with appropriate professional and patient organizations including individuals with knowledge of age appropriate vision services, shall develop criteria—

(A) governing the operation of the grant program under subsection (a); and

(B) for the collection of data related to vision assessment and the utilization of follow-up services.

(2) *COORDINATION.*—The Secretary shall, as appropriate, coordinate the program under subsection (a) with the program under section 330 of the Public Health Service Act (relating to health centers) (42 U.S.C. 254b), the program under title XIX of the Social Security Act (relating to the Medicaid program) (42 U.S.C. 1396 et

seq.), the program under title XXI of such Act (relating to the State children's health insurance program) (42 U.S.C. 1397aa et seq.), and with other Federal or State programs that provide services to children.

(c) APPLICATION.—To be eligible to receive a grant under subsection (a), a State shall submit to the Secretary an application in such form, made in such manner, and containing such information as the Secretary may require, including—

(1) information on existing Federal, Federal-State, or State-funded children's vision programs;

(2) a plan for the use of grant funds, including how funds will be used to complement existing State efforts (including possible partnerships with non-profit entities);

(3) a plan to determine if a grant eligible child has been identified as provided for in subsection (a); and

(4) a description of how funds will be used to provide items or services, only as a secondary payer—

(A) for an eligible child, to the extent that the child is not covered for the items or services under any State compensation program, under an insurance policy, or under any Federal or State health benefits program; or

(B) for an eligible child, to the extent that the child receives the items or services from an entity that provides health services on a prepaid basis.

(d) EVALUATIONS.—To be eligible to receive a grant under subsection (a), a State shall agree that, not later than 1 year after the date on which amounts under the grant are first received by the State, and annually thereafter while receiving amounts under the grant, the State will submit to the Secretary an evaluation of the operations and activities carried out under the grant, including—

(1) an assessment of the utilization of vision services and the status of children receiving these services as a result of the activities carried out under the grant;

(2) the collection, analysis, and reporting of children's vision data according to guidelines prescribed by the Secretary; and

(3) such other information as the Secretary may require.

(e) LIMITATIONS IN EXPENDITURE OF GRANT.—A grant may be made under subsection (a) only if the State involved agrees that the State will not expend more than 20 percent of the amount received under the grant to carry out the purpose described in paragraph (3) of such subsection.

(f) MATCHING FUNDS.—

(1) IN GENERAL.—With respect to the costs of the activities to be carried out with a grant under subsection (a), a condition for the receipt of the grant is that the State involved agrees to make available (directly or through donations from public or private entities) non-Federal contributions toward such costs in an amount that is not less than 25 percent of such costs.

(2) DETERMINATION OF AMOUNT CONTRIBUTED.—Non-Federal contributions required in paragraph (1) may be in cash or in kind, fairly evaluated, including plant, equipment, or services. Amounts provided by the Federal Government, or services assisted or subsidized to any significant extent by the Federal Government, may not be included in determining the amount of such non-Federal contributions.

(g) DEFINITION.—For purposes of this section, the term "comprehensive eye examination" includes an assessment of a patient's history, general medical observation, external and ophthalmoscopic examination, visual acuity, ocular alignment and motility, refraction, and as appropriate, binocular vision or gross visual fields, performed by an optometrist or an ophthalmologist.

(h) AUTHORIZATION OF APPROPRIATIONS.—For the purpose of carrying out this section, there is authorized to be appropriated \$65,000,000 for the period of fiscal years 2009 through 2013.

The SPEAKER pro tempore. Pursuant to the rule, the gentlewoman from Wisconsin (Ms. BALDWIN) and the gentleman from New York (Mr. FOSSELLA) each will control 20 minutes.

The Chair recognizes the gentlewoman from Wisconsin.

GENERAL LEAVE

Ms. BALDWIN. Madam Speaker, I ask unanimous consent that all Members have 5 legislative days to revise and extend their remarks and include extraneous material on the bill under consideration.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from Wisconsin?

There was no objection.

Ms. BALDWIN. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I rise in support of H.R. 507, the Vision Care for Kids Act of 2007.

A small but significant portion of children have visual impairments. It is estimated that vision impairment affects approximately 1.2 out of every 1,000 8-year-olds. When detected early, many childhood vision abnormalities are treatable, but the potential for correction and normal visual development diminishes with age. Vision problems can occur at any point during a lifetime, but tend to be particularly damaging to school-age children.

Impaired vision can result in adverse physical, emotional, and social consequences. For instance, a child may miss learning opportunities by failing to explore his or her environment. Additionally, if a child is visually impaired, he or she may be unable to imitate social behavior or understand non-verbal cues.

Early recognition of eye disease results in more effective treatment and that can be sight saving and sometimes even life saving. Yet, many children under the age of five do not receive any vision screening at all.

The Vision Care for Kids Act of 2007 would authorize a grant program to provide comprehensive eye exams for uninsured children with vision disorders, with priority for children under the age of 9. Funds would be used for treatment and services to correct vision disorders identified through eye exams and to increase public awareness of visual impairment in children. H.R. 507 would require States receiving funds to contribute a 25 percent match of funds for each Federal dollar obtained through the program.

The bill before us today makes great strides in providing access to an array of vision-related services, including vision screening services that can help uninsured children in low- to moderate-income families.

I want to thank my colleagues for their commitment and strong support of this legislation, and particularly commend my dear friend and colleague, Representative GENE GREEN, for his unwavering dedication to this issue.

I urge my colleagues to support this vital and important legislation.

Madam Speaker, I reserve the balance of my time.

Mr. FOSSELLA. Madam Speaker, I rise in support of H.R. 507, the Vision Care for Kids Act, and join my colleague in asking for its adoption.

And at the outset, let me thank a few individuals for bringing this bill to the floor: of course, Chairman DINGELL and Ranking Member BARTON. I'd also like to thank Representatives GREEN, SULLIVAN, and ENGEL for their leadership and support in bringing the Vision Care for Kids Act to the floor, and Mr. PASCRELL, who's been very, very passionate about this issue for many years. I've had the privilege and pleasure of working with him, and I know how passionate he is, like so many of us, to get quality vision care for kids who need it.

We've been working on this bill for about 6 years; and after countless modifications, negotiations and compromise, I'm proud to say we have a bill that is unanimously supported by the entire vision community.

And my colleague from Wisconsin put it very simply: there are many kids today who have problems with their eyes; who have an inability to see properly; who, if left untreated, obviously, leads to negative consequence in social interaction, not to mention their poor performance in school and academic achievement because of their inability to see, and not to mention the fact that they're not getting the appropriate care that in some cases leads to greater illnesses and in some cases leads to death.

The legislation we hope to pass today represents the kind of quality, sound public policy that can only come about through the bipartisan cooperation and a willingness to compromise by many interested parties.

H.R. 507 represents a responsible and sensible approach to public health. It's well documented that without the adequate access to vision screening and treatment for eye disorders, a child's entire learning and development can be adversely affected. And we say that for children who do not qualify for a public program and did not have health insurance, our assisting in catching potentially eye disorders is critical.

The bill strikes an effective balance with a shared relationship between Federal and State governments. Once States have identified, through the screening mechanism of their choice, that a child may have an eye disorder, this legislation will provide Federal funding for follow-up comprehensive eye exam and the necessary treatment.

By incorporating a three-to-one Federal-State match, we maintain incentives for States to run their programs efficiently, providing additional assurances to taxpayers that we're maximizing the use of each dollar spent.

I'd like to thank the American Academy of Ophthalmology, the Vision Council of America, Prevent Blindness

of America, the American Optometric Association for their support of the legislation, that of my colleague, and know full well that if this bill does become law, there will be children who currently don't have access to quality treatment that will get the treatment they deserve and need so that they can live a more full and healthy and happy life.

Madam Speaker, I reserve the balance of my time.

Ms. BALDWIN. Madam Speaker, I am delighted to yield 5 minutes to the gentleman from New Jersey (Mr. PASCRELL), a passionate advocate of this legislation.

Mr. PASCRELL. Madam Speaker, I want to thank the gentlelady from Wisconsin (Ms. BALDWIN), who is a model of sensitivity to the needs of all of our children.

I want to thank Congressman FOSSELLA, who's been at the forefront of this.

Madam Speaker, I rise today regarding an issue that has long been near to my heart. I've been listening to these other bills that have been put forth in bipartisan fashion. This is a good example of what we can do together when it comes to our children, their health care and their education. This is critical. This is important. So anybody who says we can't do it is not listening today.

I also want to thank Chairman DINGELL, Chairman PALLONE for their thoughtful consideration and support for preventive vision care for children. Many a kid has been put in the back of the class or sent out of the room because it was misinterpreted, misunderstood, and many times, that child had a problem with vision, with seeing and was too embarrassed to say so, or couldn't recognize it within himself. So preventive vision care is critically important to avoid vision loss and blindness in our Nation's children.

Untreated vision problems can affect a child's physical, educational, and emotional development. That is why for many years, as my good friend from Staten Island has pointed out, we have fought for legislation to set up a grant program to provide comprehensive eye exams and the necessary follow-up care for children whose families do not have the resources or access to such care.

The Center for Disease Control states that approximately 1.8 million children under the age of 18 are blind or have some form of visual impairment. Fortunately, vision loss can be avoided with early diagnosis and treatment. That is not so revealing, is it? On any such disease, early vision, early problems affecting vision, early problems affecting hearing, early problems of detection of teeth, et cetera, et cetera, many of these visual deficits are caught only after they have impaired the child's early and most critical education. That's the rub.

Eye health has a direct impact on learning and achievement. That's the core of the fight that we have waged. It

is a national disgrace, Madam Speaker, that only one in three children receive preventive vision care before they are enrolled in elementary school. That's not acceptable.

So I'm pleased to introduce this, along with Congressman GENE GREEN, and there are many others that we need to salute here who have fought this fight with us, and that is Representative LEANA ROS-LEHTINEN, Representative JOHN BOOZMAN. Senator KIT BOND on the other side of the building has waged that fight over there. A truly bipartisan effort.

It's so easy. I know it's difficult for us as Congressmen to understand that, including myself. But it's so easy that we can come together when the problem is defined and we can work together, together on a solution.

Here's a perfect example. The seven bills, the eight bills that we just have gone through, Commerce, these affect people's lives. They're not esoteric. They're not up in the sky someplace. These affect people.

H.R. 507 will establish a Federal grant program to provide for timely diagnostic examination, treatment and follow-up vision care for children.

This legislation will complement existing State programs and allow eye exams for a vulnerable pediatric population that does not qualify for Medicaid and does not qualify for SCHIP and do not have access to private health insurance. Critical that we understand this. Very important here. Very significant for those families.

Better eye care will significantly mitigate the effects of visual impairment. So it's important to act now, Madam Speaker. The prevention is more than half the battle.

Madam Speaker, I urge my colleagues to vote in favor of the Vision Care for Kids Act. Kids out there are waiting for us in all 50 States to act on this.

Thank you, Mr. FOSSELLA. Thank you to my good friend, the gentlelady from Wisconsin. And I think that we've hit a home run here for the last hour and a half, thanks to you both.

Mr. FOSSELLA. Madam Speaker, I continue to reserve the balance of my time.

Ms. BALDWIN. Madam Speaker, I am pleased to yield 4 minutes to the lead author of this bill, the gentleman from Texas (Mr. GENE GREEN).

Mr. GENE GREEN of Texas. Madam Speaker, I'd like to thank my colleague on our Energy and Commerce Committee and Health Subcommittee for allowing me to rush in from the airport to be able to put a statement on this bill.

I rise, obviously, in support of H.R. 507, the Vision Care for Kids Act. This bill has been crafted in a very bipartisan fashion with the leadership of my colleagues, Mr. FOSSELLA, Mr. PASCRELL, Mr. SULLIVAN, Mr. ENGEL, and Ms. ROS-LEHTINEN. I'd like to thank them for their dedication to children's vision issues in this legislation in particular.

The Vision Care for Kids Act establishes a much-needed grant program to provide follow-up vision care to uninsured children with vision disorders. As we tried to target the program to the children most in need, we learned very quickly that a child's access to vision screening and comprehensive vision care varies widely depending on individual State laws. For example, some States have no vision screening requirements, whereas 30 States currently mandate vision screening. Twenty-eight of these States with screening mandates, however, do not have or offer any guarantee that children who fail the screening will receive a follow-up eye exam.

On a nationwide basis, as many as 80 percent of the children who fail a vision screening do not get the follow-up care they need. Among the parents of these children, 25 percent cite financial constraints as a primary reason their child does not receive important follow-up care more than any other factor influencing their lack of care.

This lack of vision care jeopardizes a child's development and can unfortunately lead to lifelong vision impairment. These children deserve a healthy start to their educational and social development, yet the reality is that nearly two of three children entering elementary school have never received preventive vision care. Unfortunately, the lack of health experience presents a barrier to the delivery of appropriate vision care in this country. For many children who are lucky enough to have health insurance for medical care, their policy doesn't cover vision coverage. This is precisely why this bill is necessary.

□ 1745

By targeting the program toward children who are school age, uninsured, and at risk for vision disorders, the bill is designed to spend scarce health care dollars in the wisest manner possible. A portion of the grant funds will also be used to increase education and awareness of vision disorders so that the warning signs can be recognized and any problems can be detected in a timely fashion.

During the committee consideration of this legislation, we made several changes in the underlying bill. Specifically, we clarified that the Secretary should consult with professional and patient organizations when developing the criteria associated with the grant program's operations and data collection. This amendment also specifies an authorization level of \$65 million over 5 years and includes a State-matching requirement of 25 percent.

The compromise could not have been developed without the dedication of key members of the vision community, including the American Academy of Ophthalmology, the American Optometric Association, the Vision Council of America, and Prevent Blindness America.

As a founding member of the Congressional Vision Caucus, I am particularly pleased to see this bill on the House floor today and consider it a milestone for our very young caucus. In 2003, I joined my colleagues DAVID PRICE, ILEANA ROS-LEHTINEN, and PAT TIBERI in establishing the Congressional Vision Caucus. Today the Vision Caucus is comprised of more than 100 Members of the House, both Republican and Democrat, House Members and Senators. While our initial goal was to raise the awareness of vision disorders in Congress, the caucus has developed and endorsed two key pieces of vision legislation, including the Vision Care for Kids Act before us today.

It is particularly gratifying to see our efforts result in legislative success, and I thank the members of the Vision Caucus and the 152 cosponsors of this legislation for their support. I would also like to thank Chairman DINGELL and Ranking Member BARTON of the Energy and Commerce Committee, as well as the chairman and ranking member of the Health Subcommittee, Mr. PALLONE and Mr. DEAL, for their support of this legislation.

And I would also like to thank John Ford and William Garner of the committee's majority staff for their expertise, as well as Ryan Long and Katherine Martin of the minority staff for their willingness to work with us in a bipartisan fashion on this legislation.

With that, I encourage my colleagues to join us in passing this important bill to improve vision care for America's children.

Mr. FOSSELLA. Madam Speaker, let me again, in closing, thank the sponsors, Mr. GREEN and, of course, Mr. PASCRELL for really helping us to get to this point. I failed to mention Ms. ROS-LEHTINEN before. She was instrumental as well, and Mr. SULLIVAN and Mr. ENGEL. Let me commend and thank my colleague Ms. BALDWIN for her eloquence in shepherding all these bills to the floor.

As it relates to this bill, early detection, early diagnosis, and early treatment, we know that those are the magical things that have to happen in order for a child to lead a more forward, healthy life. Without the access to the care that a child needs, we know that that life is going to be compromised in some way, shape, or form.

I think that this bill helps to get us to that point. I think it will help a lot of children who currently have no help and no access.

I would also like to thank Ryan McKee from my office, who has worked on this bill for several years in our efforts.

Madam Speaker, I yield back the balance of my time.

Ms. BALDWIN. Madam Speaker, in closing, visual impairments can have lifelong consequences for children. As we have heard, this bill will help identify these impairments early so that our kids can live up to their full potential. This bill and the others that pre-

ceded it are prime examples of bipartisan cooperation.

I urge my colleagues to support this bill and those that have preceded it. And I also thank the gentleman from New York (Mr. FOSSELLA) for his assistance in expeditiously, yet comprehensively, managing the nine vital important and bipartisan health bills that were before us this afternoon.

Mr. MURPHY of Connecticut. Madam Speaker, I rise today in strong support of H.R. 507, the Vision Care for Kids Act of 2007.

This issue is simple, Madam Speaker, kids can't learn if they can't see. Providing early vision screening for our nation's children will make sure they are all ready to learn when they enter school and the Vision Care for Kids Act will help provide states with the means to offer this important care.

When I was in the Connecticut State Senate, I championed an initiative which made school-based vision screening a priority through the mandated reporting of pediatric vision screening on school health assessment forms. The passage of today's legislation will enhance my state's ability to enhance vision programs for children by providing a much needed federal stream of funding. Importantly, it will allow Connecticut's children to receive followup care when uninsured children are identified through my state's existing vision screening program.

The passage of today's legislation is another example of how this Congress is actively working to provide health services to our nation's children. This week, as the House contemplates whether we should provide 10 million American children with health insurance through the SCHIP program, we should take today as an opportunity to affirm our commitment to comprehensive health screening and coverage for all American children.

Madam Speaker, I urge all my colleagues to support H.R. 507 and yield back the balance of my time.

Mr. CLYBURN. Madam Speaker, I rise today in strong support of H.R. 507 Care for Kids Act of 2007. As you know, this bill would award grants to states to: (1) provide comprehensive eye examinations by a licensed optometrist or ophthalmologist for children identified by a licensed health care provider or vision screener, with priority to children under age nine; (2) provide treatment or services to correct vision problems of such children; and (3) develop and disseminate educational materials on recognizing signs of visual impairment in children.

Madam Speaker, studies have shown that African-Americans were most likely to report that they do not have a regular eye care professional (21 percent). And Hispanics were least likely to have seen an eye care professional in the last year (43 percent).

Madam Speaker, like many diseases, vision problems can disproportionately affect certain ethnic groups. For example, African-Americans are five times more likely to have glaucoma, Hispanics are at the greatest risk for cataracts, and myopia or near-sightedness is much more common among Asians than other ethnic groups.

But the story doesn't end there, a new study by University of Michigan pediatricians suggests that poor, uninsured, black and Hispanic children are getting the least vision care services in this country. In all, non-Hispanic and

non-black children were 47 percent more likely than Hispanic children—and 59 percent more likely than black children—to have received eye care in the last year. In addition, the study showed that uninsured black or Hispanic children were less likely than uninsured children of other races or ethnicities to have corrective lenses.

Madam speaker, we have to do better on providing care to these communities and giving these communities the healthcare professionals to deliver such care. To date, the current enrollment percentages of African-American and Hispanic students in optometry school is dismal at best. In the United States, only 3.5 percent of currently enrolled optometry students are African American. Hispanics do not fare much better, when including the InterAmerican University of Puerto Rico, the enrollment of Hispanics in U.S. optometry schools and Canada is even lower than that of African Americans.

So Madam Speaker while I strongly support this bill we must do more to address these disparities. Thus, the reason behind my outspoken wish to mandate vision care to the State Child Health Insurance Program (SCHIP) reauthorization. The lack of vision care for children can not be tolerated in this country and I look forward to working with the Congress in bringing this issue to the forefront of our debate around SCHIP.

Ms. BALDWIN. Madam Speaker, I yield back the balance of my time.

The SPEAKER pro tempore (Ms. BERKLEY). The question is on the motion offered by the gentlewoman from Wisconsin (Ms. BALDWIN) that the House suspend the rules and pass the bill, H.R. 507, as amended.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill, as amended, was passed.

A motion to reconsider was laid on the table.

RECESS

The SPEAKER pro tempore. Pursuant to clause 12(a) of rule I, the Chair declares the House in recess until approximately 6:30 p.m. today.

Accordingly (at 5 o'clock and 49 minutes p.m.), the House stood in recess until approximately 6:30 p.m.

□ 1830

AFTER RECESS

The recess having expired, the House was called to order by the Speaker pro tempore (Mrs. CAPPS) at 6 o'clock and 30 minutes p.m.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, proceedings will resume on motions to suspend the rules previously postponed.

Votes will be taken in the following order:

H. Res. 738, by the yeas and nays;

H.R. 2089, by the yeas and nays;

H.R. 20, by the yeas and nays.

The votes on H.R. 2295 and H. Con. Res. 182 will be taken tomorrow.

The first electronic vote will be conducted as a 15-minute vote. Remaining electronic votes will be conducted as 5-minutes votes.

EXPRESSING SENSE OF THE HOUSE REGARDING SYRIA'S CONTINUED INTERFERENCE IN THE AFFAIRS OF LEBANON

The SPEAKER pro tempore. The unfinished business is the vote on the motion to suspend the rules and agree to the resolution, H. Res. 738, on which the yeas and nays were ordered.

The Clerk read the title of the resolution.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from New York (Mr. ACKERMAN) that the House suspend the rules and agree to the resolution, H. Res. 738.

The vote was taken by electronic device, and there were—yeas 375, nays 5, answered “present” 1, not voting 50, as follows:

[Roll No. 961]
YEAS—375

Ackerman Cardoza Fallin
Aderholt Carnahan Farr
Akin Carney Fattah
Allen Carter Feeney
Altmire Castle Ferguson
Andrews Castor Filner
Arcuri Chabot Flake
Baca Chandler Forbes
Bachmann Clarke Fortenberry
Bachus Clay Fossella
Baird Cleaver Foxx
Baker Clyburn Frank (MA)
Baldwin Coble Franks (AZ)
Barrett (SC) Cohen Frelinghuysen
Barrow Cole (OK) Gallegly
Bartlett (MD) Conyers Garrett (NJ)
Barton (TX) Cooper Gerlach
Becerra Costa Giffords
Berkley Courtney Gilchrist
Berman Cramer Gillibrand
Berry Crenshaw Gingrey
Biggert Crowley Gohmert
Billray Cuellar Gonzalez
Billirakis Culberson Goode
Bishop (GA) Davis (AL) Goodlatte
Bishop (NY) Davis (CA) Granger
Blackburn Davis (IL) Green, Al
Blumenauer Davis (KY) Green, Gene
Blunt Davis, David Grijalva
Boehner Davis, Lincoln Hall (NY)
Bonner Davis, Tom Hall (TX)
Bono Deal (GA) Hare
Boren DeFazio Harman
Boswell DeGette Hastings (FL)
Boucher Delahunt Hastings (WA)
Boustany DeLauro Hayes
Boyd (FL) Dent Heller
Boyd (KS) Diaz-Balart, L. Hensarling
Brady (TX) Diaz-Balart, M. Herger
Braley (IA) Dicks Herseth Sandlin
Broun (GA) Dingell Higgins
Brown (SC) Doggett Hill
Brown, Corrine Donnelly Hinojosa
Brown-Waite, Doolittle Hirono
Ginny Doyle Hobson
Buchanan Drake Hodes
Burgess Dreier Hoekstra
Burton (IN) Duncan Holden
Butterfield Edwards Holt
Buyer Ehlers Honda
Calvert Ellsworth Hooley
Camp (MI) Emanuel Hoyer
Campbell (CA) Emerson Hulshof
Cannon Engel Hunter
Cantor English (PA) Inglis (SC)
Capito Eshoo Insee
Capps Etheridge Israel
Capuano Everett Issa

Jackson (IL) Miller (MI)
Jackson-Lee Miller (NC)
(TX) Miller, Gary
Jefferson Miller, George
Johnson (GA) Mitchell
Johnson, Sam Mollohan
Jones (OH) Moore (KS)
Jordan Moore (WI)
Kagen Moran (KS)
Kanjorski Moran (VA)
Kaptur Murphy (CT)
Keller Murphy, Patrick
Kennedy Murphy, Tim
Kildee Myrick
Kilpatrick Napolitano
Kind Neugebauer
King (IA) Nunes
King (NY) Oberstar
Kingston Obey
Kirk Oliver
Klein (FL) Ortiz
Kline (MN) Pallone
Knollenberg Pascrell
Kuhl (NY) Payne
LaHood Pearce
Lamborn Pence
Lampson Perlmutter
Langevin Peterson (MN)
Lantos Petri
Latham Pitts
LaTourette Platts
Lee Poe
Levin Pomeroy
Lewis (GA) Porter
Lewis (KY) Price (GA)
Linder Price (NC)
Lipinski Putnam
LoBiondo Radanovich
Loeb sack Rahall
Lofgren, Zoe Ramstad
Lucas Rangel
Lungren, Daniel Regula
E. Rehberg
Mack Reichert
Mahoney (FL) Renzi
Manzullo Reynolds
Markey Richardson
Marshall Rodriguez
Matheson Rogers (AL)
Matsui Rogers (MI)
McCarthy (CA) Rohrabacher
McCarthy (NY) Ros-Lehtinen
McCaul (TX) Roskam
McCollum (MN) Ross
McCotter Rothman
McCrery Roybal-Allard
McGovern Royce
McHenry Ruppertsberger
McHugh Rush
McIntyre Ryan (OH)
McKeon Ryan (WI)
McMorris Salazar
Rodgers Sali
McNerney Sanchez, Loretta
McNulty Sarbanes
Meek (FL) Saxton
Meeks (NY) Schiff
Michaud Schmidt
Miller (FL) Schwartz

NAYS—5

Hinchey McDermott
Jones (NC) Paul Waters

ANSWERED “PRESENT”—1

Abercrombie

NOT VOTING—50

Alexander Johnson, E. B.
Bean Kucinich
Bishop (UT) Larsen (WA)
Boozman Larson (CT)
Brady (PA) Lewis (CA)
Carson Lowey
Conaway Lynch
Costello Maloney (NY)
Cubin Marchant
Cummings Melancon
Ellison Mica
Gordon Murtha
Graves Musgrave
Gutierrez Nadler
Hastert Neale (MA)
Jindal Pastor
Johnson (IL) Peterson (PA)

Scott (GA) Scott (VA)
Sensenbrenner Serrano
Sestak Shadegg
Shays Shea-Porter
Sherman Shimkus
Shuler Shuster
Simpson Simpson
Sires Skelton
Slaughter Smith (NE)
Smith (NJ) Smith (TX)
Snyder Solis
Space Spratt
Stark Stearns
Stupak Sullivan
Sutton Tanner
Tauscher T aylor
Terry Thompson (CA)
Thompson (MS) Thornberry
Tiahrt Tiberi
Tierney Towns
Turner Udall (CO)
Udall (NM) Upton
Van Hollen Velázquez
Visclosky Walberg
Walden (OR) Walsh (NY)
Walsh (MN) Wamp
Wasserman Schultz
Watson Watt
Waxman Welch (VT)
Westmoreland Wexler
Wicker Wilson (NM)
Wilson (SC) Wolf
Wu Wynn
Yarmuth Young (AK)
Young (FL)

□ 1855

Mr. MARIO DIAZ-BALART of Florida and Mrs. JONES of Ohio changed their vote from “nay” to “yea.”

Mr. ABERCROMBIE changed his vote from “nay” to “present.”

So (two-thirds being in the affirmative) the rules were suspended and the resolution was agreed to.

The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

Stated for:

Ms. SCHAKOWSKY. Madam Speaker, on rollcall No. 961, had I been present, I would have voted “yea.”

LOUISIANA ARMED SERVICES VETERANS POST OFFICE

The SPEAKER pro tempore. The unfinished business is the vote on the motion to suspend the rules and pass the bill, H.R. 2089, on which the yeas and nays were ordered.

The Clerk read the title of the bill.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Illinois (Mr. DAVIS) that the House suspend the rules and pass the bill, H.R. 2089.

This will be a 5-minute vote.

The vote was taken by electronic device, and there were—yeas 383, nays 0, not voting 48, as follows:

[Roll No. 962]
YEAS—383

Abercrombie Burton (IN) Diaz-Balart, L.
Ackerman Butterfield Diaz-Balart, M.
Aderholt Buyer Dicks
Akin Calvert Dingell
Alexander Camp (MI) Doggett
Allen Campbell (CA) Donnelly
Altmire Cannon Doolittle
Andrews Cantor Doyle
Arcuri Capito Drake
Baca Capps Dreier
Bachmann Capuano Duncan
Bachus Cardoza Edwards
Baird Carnahan Ehlers
Baker Carney Ellsworth
Baldwin Carter Emanuel
Barrett (SC) Castle Emerson
Barrow Castor Engel
Bartlett (MD) Chabot English (PA)
Barton (TX) Chandler Eshoo
Becerra Clarke Etheridge
Berkley Berkeley Clay
Berman Cleaver Everett
Berry Clyburn Fallin
Biggert Coble Fattah
Billray Cohen Feeney
Billirakis Cole (OK) Ferguson
Bishop (GA) Conyers Filner
Bishop (NY) Cooper Flake
Blackburn Costa Forbes
Blumenauer Costello Fortenberry
Blunt Courtney Fossella
Boehner Cramer Foxx
Bonner Crenshaw Frank (MA)
Brown, Corrine Crowley Franks (AZ)
Brown-Waite, Cuellar Frelinghuysen
Ginny Culberson Gallegly
Buchanan Davis (AL) Garrett (NJ)
Burgess Davis (GA) Gerlach
Burton (IN) Davis (IL) Giffords
Butterfield Davis (KY) Gillibrand
Buyer Davis, David Gingrey
Calvert Davis, Lincoln Gohmert
Camp (MI) Davis, Tom Gonzalez
Campbell (CA) Deal (GA) Goode
Cannon DeFazio Goodlatte
Cantor English (PA) DeGette Granger
Capito Eshoo Delahunt Green, Al
Capps DeLauro Green, Gene
Capuano Dent Grijalva

Hall (NY) Matheson
Hall (TX) Matsui
Hare McCarthy (CA)
Harman McCarthy (NY)
Hastert McCaul (TX)
Hastings (FL) McCollum (MN)
Hastings (WA) McCotter
Hayes McCrery
Heller McDermott
Hensarling McGovern
Herger McHenry
Herseth Sandlin McHugh
Higgins McIntyre
Hill McKeon
Hinchey McMorris
Hinojosa Rodgers
Hirono McNerney
Hobson McNulty
Hodes Meek (FL)
Hoekstra Meeks (NY)
Holden Mica
Holt Michaud
Honda Miller (FL)
Hooley Miller (MI)
Hoyer Miller (NC)
Hulshof Miller, Gary
Hunter Miller, George
Inglis (SC) Mitchell
Inslee Mollohan
Israel Moore (KS)
Issa Moore (WI)
Jackson (IL) Moran (KS)
Jackson-Lee Moran (VA)
(TX) Murphy (CT)
Jefferson Murphy, Patrick
Johnson (GA) Murphy, Tim
Johnson, Sam Myrick
Jones (NC) Napolitano
Jones (OH) Neugebauer
Jordan Nunes
Kagen Oberstar
Kanjorski Obey
Kaptur Olver
Keller Ortiz
Kennedy Pallone
Kildee Pascrell
Kilpatrick Paul
Kind Payne
King (IA) Pearce
King (NY) Pence
Kingston Perlmutter
Kirk Peterson (MN)
Klein (FL) Petri
Kline (MN) Pitts
Knollenberg Platts
Kuhl (NY) Poe
LaHood Pomeroy
Lamborn Porter
Lampson Price (GA)
Langevin Price (NC)
Lantos Putnam
Latham Rahall
LaTourette Ramstad
Lee Rangel
Levin Regula
Lewis (GA) Rehberg
Lewis (KY) Reichert
Linder Renzi
Lipinski Reynolds
LoBiondo Richardson
Loeb sack Rodriguez
Lofgren, Zoe Rogers (AL)
Lowey Rogers (MI)
Lucas Rohrabacher
Lungren, Daniel Ros-Lehtinen
E. Roskam
Mack Ross
Mahoney (FL) Rothman
Manzullo Roybal-Allard
Markey Royce
Marshall Ruppertsberger

NOT VOTING—48

Bean Johnson, E. B.
Bishop (UT) Kucinich
Boozman Larsen (WA)
Brady (PA) Larson (CT)
Carson Lewis (CA)
Conaway Lynch
Cubin Maloney (NY)
Cummings Marchant
Ellison Melancon
Gilchrest Murtha
Gordon Musgrave
Graves Nadler
Gutierrez Neal (MA)
Jindal Pastor
Johnson (IL) Peterson (PA)

Weiner Weller
Weldon (FL) Whitfield
Wilson (OH) Woolsey

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE
The SPEAKER pro tempore (during the vote). Members are advised 2 minutes remain in this vote.

□ 1903

So (two-thirds being in the affirmative) the rules were suspended and the bill was passed.

The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

MELANIE BLOCKER-STOKES POST-PARTUM DEPRESSION RESEARCH AND CARE ACT

The SPEAKER pro tempore. The unfinished business is the vote on the motion to suspend the rules and pass the bill, H.R. 20, as amended, on which the yeas and nays were ordered.

The Clerk read the title of the bill.

The SPEAKER pro tempore. The question is on the motion offered by the gentlewoman from Wisconsin (Ms. BALDWIN) that the House suspend the rules and pass the bill, H.R. 20, as amended.

This will be a 5-minute vote.

The vote was taken by electronic device, and there were—yeas 382, nays 3, not voting 46, as follows:

[Roll No. 963]

YEAS—382

Abercrombie Buyer
Ackerman Calvert
Aderholt Camp (MI)
Akin Campbell (CA)
Alexander Cannon
Allen Cantor
Altmire Capito
Andrews Capps
Arcuri Capuano
Baca Cardoza
Bachmann Carnahan
Bachus Carney
Baird Carter
Baker Castle
Baldwin Castor
Barrett (SC) Chabot
Barrow Chandler
Bartlett (MD) Clarke
Barton (TX) Clay
Becerra Cleaver
Berkley Clyburn
Berman Coble
Berry Cohen
Biggert Cole (OK)
Billbray Conyers
Bilirakis Cooper
Bishop (GA) Costa
Bishop (NY) Costello
Blackburn Courtney
Blumenauer Cramer
Blunt Crenshaw
Boehner Crowley
Bonner Cuellar
Bono Culberson
Boren Davis (AL)
Boswell Davis (CA)
Boucher Davis (IL)
Boustany Davis (KY)
Boyd (FL) Davis, David
Boyd (KS) Davis, Lincoln
Brady (TX) Davis, Tom
Braley (IA) Deal (GA)
Brown (SC) DeFazio
Brown, Corrine DeGette
Brown-Waite, Delahunt
Ginny DeLauro
Buchanan Dent
Burgess Diaz-Balart, L.
Burton (IN) Diaz-Balart, M.
Butterfield Dicks

Hastert
Hastings (FL)
Hastings (WA)
Hayes
Heller
Hensarling
Herger
Herseth Sandlin
Higgins
Hill
Hinchey
Hinojosa
Hirono
Hobson
Hodes
Hoekstra
Holden
Holt
Honda
Hooley
Hoyer
Hulshof
Hunter
Inglis (SC)
Inslee
Israel
Issa
Jackson (IL)
Jackson-Lee (TX)
Jefferson
Johnson (GA)
Johnson, Sam
Jones (NC)
Jones (OH)
Jordan
Kagen
Kanjorski
Kaptur
Keller
Kennedy
Kildee
Kilpatrick
Kind
King (IA)
King (NY)
Kingston
Kirk
Klein (FL)
Kline (MN)
Knollenberg
Kuhl (NY)
LaHood
Lamborn
Lampson
Langevin
Lantos
Latham
LaTourette
Lee
Levin
Lewis (GA)
Lewis (KY)
Linder
Lipinski
LoBiondo
Loeb sack
Lofgren, Zoe
Lowey
Lucas
Lungren, Daniel E.
Mack
Mahoney (FL)
Manzullo
Markey
Marshall

McCarthy (CA)
McCarthy (NY)
McCaul (TX)
McCollum (MN)
McCotter
McCrery
McDermott
McGovern
McHenry
McHugh
McIntyre
McKeon
McMorris
Rodgers
McNerney
McNulty
Meek (FL)
Meeks (NY)
Michaud
Miller (FL)
Miller (MI)
Miller (NC)
Miller, Gary
Miller, George
Mitchell
Mollohan
Moore (KS)
Moore (WI)
Moran (KS)
Moran (VA)
Murphy (CT)
Murphy, Patrick
Murphy, Tim
Myrick
Napolitano
Neugebauer
Nunes
Oberstar
Obey
Olver
Ortiz
Pallone
Pascrell
Payne
Pearce
Pence
Perlmutter
Peterson (MN)
Petri
Pitts
Platts
Poe
Pomeroy
Porter
Price (GA)
Price (NC)
Putnam
Rahall
Ramstad
Rangel
Regula
Rehberg
Reichert
Renzi
Reynolds
Richardson
Richardson
Rodriguez
Rogers (AL)
Rogers (MI)
Rohrabacher
Ros-Lehtinen
Roskam
Ross
Rothman
Roybal-Allard
Royce
Ruppertsberger

Ryan (OH)
Ryan (WI)
Salazar
Sali
Sanchez, Loretta
Sarbanes
Saxton
Schakowsky
Schiff
Schmidt
Schwartz
Scott (GA)
Scott (VA)
Sensenbrenner
Serrano
Sestak
Shadegg
Shays
Shea-Porter
Sherman
Shimkus
Shuler
Shuster
Simpson
Sires
Skelton
Slaughter
Smith (NE)
Smith (NJ)
Smith (TX)
Snyder
Solis
Space
Spratt
Stark
Stearns
Stupak
Sutton
Tanner
Tauscher
Taylor
Terry
Thompson (CA)
Thompson (MS)
Thornberry
Tiahrt
Tiberi
Tierney
Towns
Turner
Udall (CO)
Udall (NM)
Upton
Van Hollen
Velázquez
Visclosky
Walberg
Walden (OR)
Walsh (NY)
Walz (MN)
Wamp
Wasserman
Schultz
Waters
Watt
Waxman
Welch (VT)
Westmoreland
Wexler
Wicker
Wilson (NM)
Wilson (SC)
Wolf
Wu
Wynn
Yarmuth
Young (AK)
Young (FL)

NAYS—3

Broun (GA) Flake Paul
Giffords
Gilchrest
Gillibrand
Gingrey
Gohmert
Gonzalez
Goode
Goodlatte
Granger
Green, Al
Green, Gene
Grijalva
Hall (NY)
Hall (TX)
Hare
Harman

Bean Johnson, E. B.
Bishop (UT) Kucinich
Boozman Larsen (WA)
Brady (PA) Larson (CT)
Carson Lewis (CA)
Conaway Lynch
Cubin Maloney (NY)
Cummings Marchant
Ellison Melancon
Gordon Murtha
Graves Smith (WA)
Gutierrez Nadler
Jindal Neal (MA)
Johnson (IL) Pastor

NOT VOTING—46

Peterson (PA)
Picking
Pryce (OH)
Radanovich
Reyes
Rogers (KY)
Sanchez, Linda T.
Sessions
Smith (WA)
Souder
Sullivan
Tancredo
Watson

Welch (VT) Weller Wilson (OH)
Weldon (FL) Whitfield Woolsey

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE
The SPEAKER pro tempore (during the vote). Members are advised there are 2 minutes remaining on this vote.

□ 1910

So (two-thirds being in the affirmative) the rules were suspended and the bill, as amended, was passed.

The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

PERSONAL EXPLANATION

Mr. LARSON of Connecticut. Madam Speaker, I would like to submit this statement for the RECORD and regret that I was not present to vote on rollcall vote Nos. 961, 962, and 963. Had I been present, I would have voted:

“Yea” on rollcall vote No. 961 on H. Res. 738 expressing the sense of the House of Representatives regarding the Government of Syria’s continued interference in the internal affairs of Lebanon; “yea” on rollcall vote No. 962 on H.R. 2089, to designate the facility of the United States Postal Service located at 701 Loyola Avenue in New Orleans, Louisiana, as the “Louisiana Armed Services Veterans Post Office”; and “yea” on rollcall vote No. 963 on H.R. 20, to provide for research on, and services for individuals with, postpartum depression and psychosis.

REMOVAL OF NAME OF MEMBER AS COSPONSOR OF H. RES. 106 AND H. RES. 610

Ms. KILPATRICK. Mr. Speaker, I ask unanimous consent that I be removed as a cosponsor from H. Res. 106 and H. Res. 610.

The SPEAKER pro tempore (Mr. MITCHELL). Is there objection to the request of the gentlewoman from Michigan?

There was no objection.

REMOVAL OF NAME OF MEMBER AS COSPONSOR OF H. RES. 106

Mr. ROSS. Mr. Speaker, I ask unanimous consent to have my name removed as a cosponsor from H. Res. 106.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Arkansas?

There was no objection.

REMOVAL OF NAME OF MEMBER AS COSPONSOR OF H. RES. 106

Mr. LINCOLN DAVIS of Tennessee. Mr. Speaker, I ask unanimous consent to have my name removed as a cosponsor of H. Res. 106.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Tennessee?

There was no objection.

REMOVAL OF NAME OF MEMBER AS COSPONSOR OF H. RES. 106

Mr. BERRY. Mr. Speaker, I ask unanimous consent for my name to be removed as a cosponsor of H. Res. 106.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Arkansas?

There was no objection.

REMOVAL OF NAME OF MEMBER AS COSPONSOR OF H. RES. 106

Mr. BOYD of Florida. Mr. Speaker, I ask unanimous consent to have my name removed as a cosponsor for H. Res. 106.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Florida?

There was no objection.

REMOVAL OF NAME OF MEMBER AS COSPONSOR OF H. RES. 106

Mr. HERGER. Mr. Speaker, I request unanimous consent that my name be removed as a cosponsor of H. Res. 106.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from California?

There was no objection.

REMOVAL OF NAME OF MEMBER AS COSPONSOR OF H. RES. 106

Mr. BISHOP of Georgia. Mr. Speaker, I ask unanimous consent that my name be withdrawn as a cosponsor of H. Res. 106.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Georgia?

There was no objection.

PERSONAL EXPLANATION

Mr. PATRICK J. MURPHY of Pennsylvania. Mr. Speaker, the rules of the House do not allow me to remove myself from cosponsor at this time of H.R. 811, but this statement serves that I am not to be perceived as a cosponsor of this bill at this time.

OVERRIDING THE VETO ON SCHIP

(Ms. JACKSON-LEE of Texas asked and was given permission to address the House for 1 minute and to revise and extend her remarks.)

Ms. JACKSON-LEE of Texas. Mr. Speaker, in a little less than 72 hours, this House will have the opportunity to make one of the most definitive and powerful stands for the Nation’s children.

Let me go on record by indicating that this Nation has over a period of time mistreated her children. Now we have the opportunity to insure millions of children with health coverage through the SCHIP program, a program now that has seen itself last for a decade of success in preventing devastating health conditions for young children.

I know this because just last week I visited St. Joseph’s Hospital, the neonatal unit. We heard stories from young mothers talk about children who have been saved and, yes, talk about those who have not been saved because they could not enroll in the SCHIP program.

Why in the world would we suffer a veto to deny our children a mere \$35 billion to cover them for preventative health care?

I ask my colleagues to overturn this veto, and I join the Congressional Black Caucus to ensure that that happens. The fight is for our children. We cannot yield.

□ 1915

GOD & CENSORSHIP

(Mr. POE asked and was given permission to address the House for 1 minute.)

Mr. POE. Mr. Speaker, good news. That which has been removed has been returned. That which has been censored is censored no more. Let me explain.

The Architect of the Capitol took it upon himself to remove references of God from the official certificates that accompany flags that are flown over the Capitol. These flags and certificates are given to schools, citizens, and the military. Some Members of Congress, for example, request the words “God” and “Country” to be incorporated into the certificate. However, the word “God” was unilaterally stricken and censored from the document by the Architect. But those days are over. The Architect will now allow the word “God” on such certificates.

The national motto is “In God We Trust.” We pledge allegiance saying “one Nation under God.” Our history is based upon a belief in the Supreme Being. And much of this Capitol has references to the Almighty.

Mr. Speaker, many Americans are tired of paranoia government censorship of God, and consider attempts to remove God from America a violation of their constitutional rights. Thank God.

And that’s just the way it is.

SPECIAL ORDERS

The SPEAKER pro tempore. Under the Speaker’s announced policy of January 18, 2007, and under a previous order of the House, the following Members will be recognized for 5 minutes each.

IRAQ WAR

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from California (Ms. WATERS) is recognized for 5 minutes.

Ms. WATERS. Mr. Speaker, Members, last Friday, Retired Lieutenant General Ricardo Sanchez, who led U.S. forces in Iraq following the invasion in

2003, became the latest in a growing list of retired military officers who harshly criticize the war in Iraq. He said that the United States is "living a nightmare with no end in sight." General Sanchez also lambasted the latest strategy in Iraq calling it, again, "a desperate attempt by the administration that has not accepted the political and economic realities of this war."

These startling revelations from the highest ranks of our military should shake us to our very core. The man who was personally responsible for conducting the war in Iraq is trying to convince us that we should have no faith in the administration now waging the war.

General Sanchez went on to say, "There has been a glaring unfortunate display of incompetent strategic leadership within our national leaders," and that "the American people must hold them accountable."

But, General Sanchez, how can the American people hold their elected officials accountable? As we all know, they can make a lot of noise by calling congressional offices, writing letters, and attending marches; but at the end of the day, the American people hold their elected officials accountable at the ballot box.

To my colleagues in the House of Representatives, our constituents have already made up their minds. An overwhelming majority of people think it was a mistake to invade Iraq and believe that setting a timetable for withdrawal is the correct course of action. Most Democrats and Republicans agree that an open-ended occupation of Iraq is an awful idea. But the Iraqi people don't want us there, and we have no timetable for withdrawal.

What do we have if not an open-ended occupation? What more do we need to learn before deciding that this war must be brought to a halt? Day after day, the grim realities unfolding in Iraq paint a picture of futility and mismanagement. More lives are lost, more money is squandered, and Iraq falls deeper and deeper into chaos and civil war.

President Bush has had our military in pursuit of a victory that is perpetually "just around the corner." Well, we have been around the corner and back again. There is no victory to be found. The time to end this debacle has long since passed. The United States military presence has reinforced in the minds of the Iraqis the most damaging lesson an emerging nation can learn: that problems are solved with bullets and bombs instead of compromise and cooperation. Instead of encouraging compromise and fostering cooperation among the various warring tribes, we have done the exact opposite. We continue to spend billions of dollars blindly arming Iraqis who volunteer to serve in the Iraqi security forces with no thought as to where their loyalties might lie when we hand them weapons.

On one hand, as Anthony Cordesman of the Center for Strategic and Inter-

national Studies points out, we have not addressed the degree to which all elements of the Iraqi security forces, from the Prime Minister's office down, have links to Shiite efforts to retain and expand power and carry out sectarian cleansing in mixed areas.

On the other hand, the bottom-up reconciliation that Bush brags about is arming and empowering the Sunni militias in Anbar province and elsewhere. This is, as a recent article in the Economist suggests, a recipe for civil war and only serves to undermine the central government of Iraq.

These irresponsible and dangerous tactics not only harm future prospects for stability in Iraq, but seriously erode our standing in the Middle East and larger international community.

I would like to commend General Sanchez for speaking out against the Bush administration. But how many more General Sanchezes will it take before the last Congressperson turns against the occupation of Iraq? How many more investigations of Blackwater's abuse, of Halliburton's fraud, how many more reports of our overstretched military at its breaking point, or about the damage our occupation is doing to our international standing? How much more of this debate do we need before our national leaders accept that the Iraq war is actually making our country less safe?

For the good of this great Nation and for the good of Iraq, it is time to bring our troops home and end the occupation of Iraq.

Mr. Speaker and Members, I know that there is an attempt to put a good face on the surge and to try and make us believe that the surge is working, but just read your newspapers every day and see the number of lives that are being lost, not only of our own soldiers, but of the Iraqis.

CORPORAL DONALD E. VALENTINE III—U.S. ARMY

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Texas (Mr. POE) is recognized for 5 minutes.

Mr. POE. Mr. Speaker, "The soldier is the Army, and wars may be fought with weapons, but they are won by men. While we mourn those men who die, we should thank God such men ever lived." These are the words of General George Patton in World War II.

Mr. Speaker, one of those soldiers was Corporal Donald E. Valentine III of the United States Army. He was born in Houston, Texas, on March 5, 1986. Donald Valentine joined the United States Army because of the 9/11 attack on this country.

His mother Anna said, "My husband and I were behind Donald 100 percent. I was so proud of him no matter what he ever did. He made me very proud to be his mother." Words from another of America's Gold Star Mothers.

I met Anna Valentine and many members of the Valentine family re-

cently at Veterans National Cemetery in Houston, where mothers like Anna who had children killed in Iraq and Afghanistan were being honored. We call those noble women Gold Star Mothers. Anna Valentine's son is buried on that hallowed ground of the fallen in Houston, Texas.

Corporal Valentine was killed along with two other soldiers on September 18 in Muqdadiyah, Iraq, when an IED, an improvised explosive device, detonated near him.

Mr. Speaker, you understand the use of an IED by America's enemy is a coward's way of fighting the war. These enemies rant and rave and preach hate in the name of religion, but they cover their faces with masks and hide in caves and dark, dusty ditches. They are afraid to come out in the open and face the American soldier, so our enemy detonates remote-controlled bombs.

Corporal Donald Valentine III comes from a military family. His father, Donald II, is a Navy veteran. His brother Daniel wanted to enlist to be with his brother Donald in Iraq, and Daniel, 19, still intends to join the military. Mr. Speaker, America owes much to families like the Valentines.

Donald was married 1 year to Lucia, who said Donald had all the qualities any girl would want. She had talked to Donald on their first anniversary, 3 days before his death in Iraq. Corporal Valentine told his family that, if he did not survive the war, they should stay strong. He is the 91st fallen servicemember with ties to the Houston area to have been killed in Iraq or Afghanistan.

Corporal Donald Valentine was assigned to the 2nd Battalion, 23rd Infantry Regiment, 4th Brigade, 2nd Infantry Division of the Stryker Brigade Combat Team from Fort Lewis, Washington.

Being from a military family, he moved around a lot as a child. He lived in Florida most of his life and in Idaho, but wanted to be buried in "Big H," as he called Houston, Texas, because of many reasons. One of those reasons was because he spent so much time growing up with his grandparents who live in Houston. Mr. Speaker, Donald's grandparents, Thomas and Lupe Cortez, and his other grandmother Geneva Fernandez, survive their grandson.

As a grandfather of five with two more grandkids on the way, I think it would be a most difficult task to bury a grandson in the vigor of their youth.

In the official statement on Donald's death, the family said, "Donald touched the lives of so many with his big heart. We will cherish the beautiful memories we shared with you. You made us so very proud. Now heaven has another hero. And, continue to watch over us as an angel in heaven."

On September 28, 2007, taps played for the last time as 21 guns saluted this American soldier. This is a photograph of Donald Valentine III.

A statement has been credited to one of Rome's centurions when he told his

troops, "How you yet live will echo throughout eternity." Corporal Valentine lived a short but faithful life to the things that were important to him: family and country. He was 21 when he was killed.

Mr. Speaker, General George Patton was right about such warriors. We should thank God that such men as Corporal Donald Valentine III died and lived.

And that's just the way it is.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from California (Ms. LEE) is recognized for 5 minutes.

(Ms. LEE addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from North Carolina (Mr. JONES) is recognized for 5 minutes.

(Mr. JONES of North Carolina addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

□ 1930

IN OPPOSITION TO RESOLUTION REGARDING ARMENIA

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Texas (Mr. BURGESS) is recognized for 5 minutes.

Mr. BURGESS. Mr. Speaker, I want to come to the floor of the House tonight and add my voice to a lot of my colleagues in opposition to the dangerous resolution condemning Turkey for reported atrocities against the Armenian people. Everyone regrets what happened at the end of the First World War; but, Mr. Speaker, we are in the midst of a very complicated war, a complicated war in which every ally is valuable to our war effort.

This resolution, Mr. Speaker, this resolution has the potential to inflict damage on the United States-Turkish relationship such that it would be very difficult to repair it, and this should be at the forefront of our minds as we consider bringing to the floor for a vote.

I am concerned about this resolution, and I urge the Speaker not to allow these actions.

I am asking us to consider the long-lasting negative effects that this resolution could have on our foreign policy interests. The last thing we need is for an American ally to stray from the path of victory in Iraq, and with President Abdullah Gul threatening to withdraw Turkey's support of the Iraq war should we vote on and pass this risky resolution, this possibility unfortunately is moving ever closer to reality.

Mr. Speaker, Turkey continues to be a consistent U.S. partner in developing some of the crucial defense equipment we're going to need to protect our country into the future. Currently,

Turkey is aiding in the development of Lockheed Martin's F-35 Lightning fighter. I can testify to the significant importance of sustaining positive relations with Turkey, because the final assemblage of the aforementioned aircraft will, in fact, take place at Lockheed Martin's Ft. Worth plant which is very near my district in North Texas. These are important developments in the war on terror and now is not the time to compromise these efforts.

But more importantly, Mr. Speaker, this resolution, this resolution is ill timed and ill suited for a country at war. What will happen to the transport of goods, fuel, food, fiber through Turkey into northern Iraq?

And if those shipments, if those shipments of food, fuel and fiber are delayed or ended by the Turks, who wins and who loses?

Mr. Speaker, I will submit that the average American probably doesn't know the answer to that question. It's not that they're indifferent, but they just don't know if there's going to be a winner or a loser. The average Turk, while he may care, is really just pretty mad about it all.

But, Mr. Speaker, I would submit it is the Iraqi citizen who is on our side who will lose. They will be denied sustenance. They will be denied food for their family. They will be denied fuel to heat their homes in the coming winter in the northern part of Iraq, in a country that has been ravaged by war.

Well, if Iraqis who are friendly to us are likely to be hurt, what about the enemy in Iraq? Well, Mr. Speaker, they may be the indirect winner because after all, we know they love chaos; and anything that increases disorder in Iraq's fragile social system benefits our enemy.

Mr. Speaker, I am not connecting dots that have not already been connected. Right as we left before the August recess the majority whip was quoted as saying if things go well in Iraq, it's bad for us; it's bad for our majority party.

Mr. Speaker, sadly, then we've seen several times during the month of September where it does seem like sometimes they're invested in defeat.

But who really bears the brunt is the United States soldier. And, Mr. Speaker, this is not just a theoretical concern. October 2000, same bill, conflicts are a little bit different. Northern watch, keeping the Iraqis from attacking the Kurds. Those planes in northern Iraq to enforce the no-fly zone and keep Saddam from attacking the Kurds, those F-16s flew out of Turkey and they kept watch every day of every week during what we now know as Northern Watch. They kept the Iraqi Republican Guard in a box and kept them from attacking Kurds.

Mr. Speaker, I was not in Congress in October of 2000. But I will tell you that a young man who is now a constituent, actually stationed in Clovis, New Mexico, but was moved to Incurlik, Turkey, and was on duty then, he talked to

me back in October of 2000. He said, we were away from home in a place that really was awfully strange for a 21-year-old. And then we picked up our newspapers one morning and there's a big hole in the side of a United States ship, the USS *Cole* which was bombed in October of 2000. The tension was mounting daily. Other attacks were a possibility. And then all hell broke loose outside the base. There was protests, there was shouting, there were people yelling at us at the gate. None of us were allowed off the base. And why? Because the House of Representatives was going to take up the Armenian genocide resolution.

Mr. Speaker, this constituent was my son. He asked me then, Dad, why is Congress making things tougher for us over here? I didn't have an answer for him now and I don't have an answer for him now. President Clinton did not support this bill in 2000. Majority Leader Arney refused to allow it to come to the floor. Don't make life tougher for our soldiers. We're a country at war. Let's act like it for once.

PERU FREE TRADE AGREEMENT

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Maine (Mr. MICHAUD) is recognized for 5 minutes.

Mr. MICHAUD. Mr. Speaker, in the coming days Congress will consider the Peru Free Trade Agreement. I rise tonight to ask why are we in such a rush to approve a flawed and misguided trade policy.

The Peru Free Trade Agreement doesn't enjoy the support of any of the constituencies which it's supposed to benefit. No labor unions vocally are out supporting this agreement. Why would they? The labor standards are unenforceable. It doesn't protect "buy America." It promotes off-shoring of our industries.

The Peru Free Trade Agreement is just like the NAFTA-CAFTA framework. NAFTA has cost Maine over 23 percent of our manufacturing base. The new labor environmental language will do nothing to improve the situation.

The Bush administration claims that the agreement will improve labor standards in Peru and, in the next breath, Tom Donahue, president of the United States Chamber of Commerce states that he is "encouraged by assurances that the labor provisions cannot be read to require compliance with the ILO conventions."

So why are we rushing to approve such a toothless measure?

Why is Congress moving so fast to approve a trade policy which has not been subject to a full hearing since the deal was announced? The last hearing on the Peru Free Trade Agreement in the Ways and Means Committee was held in 2006. There are no environmental groups that are rallying support for the unenforceable environmental protections. That includes the Sierra Club and Friends of the Earth.

So why are we not taking the time to consider the impact the Peru FTA will have on our environment, our intellectual property or privatization of Social Security?

Even the labor leaders of major Peruvian labor organizations oppose this agreement. They urge Congress to vote "no," claiming that it will weaken labor standards, encourage illegal immigration to the United States, and increase the rates of drug trafficking and violence.

So who supports this agreement? Big Business. It's the large multinational companies who seek to profit off the backs of working men and women in our country.

Remember back on May 10 when we heard about the new trade model? Well, if it's so new and great, then why aren't we hearing from all sides on the trade debate asking us to support it? There is a reason: there is not much new about it. It's the same old model with a little fancy title.

I ask my colleagues to take a step back and consider this agreement carefully, demand the enforcement of the labor standards that conform with the ILO Conventions and environmental protection that might actually protect the environment.

I ask my colleagues to consider the impact of this agreement and to question why we are moving so quickly to box ourselves into a corner. And I'm asking Members to listen to their constituents.

All across this country, the American citizens are opposed to these bad, flawed trade deals. This is more of the same. We must have a new trade model. We have to start thinking globally of how we're going to deal with the globalization in this world today. So I encourage my colleagues to vote "no" on the Peru trade deal.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Indiana (Mr. BURTON) is recognized for 5 minutes.

(Mr. BURTON of Indiana addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Illinois (Mr. HARE) is recognized for 5 minutes.

(Mr. HARE addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

STATE CHILDREN'S HEALTH INSURANCE PROGRAM

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Wisconsin (Mr. KAGEN) is recognized for 5 minutes.

Mr. KAGEN. Mr. Speaker, we've been talking the last several weeks here in Congress about the SCHIP, the State Children's Health Insurance Program.

This is the SCHIP face I'd like to show America. Before I discuss with you in the next several minutes the SCHIP program, I'd like to show you the face of Kailee Meronek from Appleton. I represent her. She's not here to speak for herself, so I have the great honor and duty of speaking on her behalf. She has a younger sister who is 3 months of age, and a young mother who's earning \$2.33 an hour at a restaurant. She qualifies for SCHIP. She has benefited from SCHIP; and because she is covered by this state-run program, she sees her doctor in the doctor's office and not in the emergency room. Kailee needs our help and she needs our support. She will some day have to pay for a war that is costing the American taxpayers \$400 million a day. And yet we're not even paying for this war. The occupation of Iraq is being paid for by borrowed money from China that Kailee and her younger sister, Cassidy, will have to pay back some day.

The SCHIP program is a state-run program that's been very successful. We aim to reauthorize this program and expand its coverage to all children in America who are eligible. That's up to about 10.8 million to 11 million children who are the lowest income strata in the country.

The SCHIP program will focus on the working families who need the help the most. It will guarantee access to health care at the doctor's office, not at the expensive emergency room. If anyone listening thinks that SCHIP is not a good deal, you're going to spend much more money taking care of Kailee and her family at the emergency room than at the doctor.

SCHIP reduces your taxes. It cuts the cost of caring for families who are most in need.

How about the money? \$3.50 a day. Kailee is not asking for that money; she deserves it.

What kind of Nation are we? What kind of Nation would turn their back on Kailee and Cassidy and their mother, Wendy? Not this America.

I want my country back. I want a country that still cares about people more than corporations. I want a country that respects its laws and obeys all of its laws, including signing statements. We don't need signing statements. We need someone in our offices in the administration who cares about people.

Kailee and her sister, Cassidy, need our help. I'm asking all Republicans, all Democrats, forget your party leadership. Forget your association with your party. Think about the people you represent, like this young girl.

We aim to cover 57,778 people in Wisconsin on the SCHIP program, and hope to expand it another 37,000. We do it in a fair way, in a way that's called pay-as-you-go, not like our occupation of Iraq. We're going to pay as we go.

I ask America tonight to put a human face on the SCHIP program. Help Kailee. Support Kailee, her sister and her family and everyone in this country who needs our help.

What kind of Nation are we? We'll find out on Thursday. America is listening.

My colleagues, Mr. Speaker, I ask you to support the SCHIP bill and override the Presidential veto.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from California (Ms. WOOLSEY) is recognized for 5 minutes.

(Ms. WOOLSEY addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

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HEALTH CARE FOR IRAQ AND AFGHANISTAN WAR VETERANS

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Ohio (Ms. KAPTUR) is recognized for 5 minutes.

Ms. KAPTUR. Mr. Speaker, I think it's important for the President of the United States to pay attention to the over 100,000 Iraqi and Afghani veterans that are coming back to our country, U.S. citizens who have been wounded, 100,000.

This House passed a bill that increases spending in the Department of Veterans Affairs by 18 percent, the largest increase in American history, which is deserved because we have injured soldiers coming back to us who are not being treated. That bill is log jammed in the Senate. I invite the President of the United States to call over to the leadership in the Senate to say he's going to sign that bill and to move that bill this week.

Yesterday, I was out welcoming in an official ceremony the 983rd Combat Engineer Unit Heavy from the State of Ohio. It's a Reserve unit, over 1,000 soldiers who have been deployed to the theater in Iraq who came home, and this was the official welcome home ceremony to present them their warrior citizen flags and medals. It was a moving ceremony honoring their valor and their service to our country.

I had the opportunity at that ceremony to talk to Mrs. Tiffany Eckhart, the widow of Andy Eckhart, who lost his life in Iraq. And he was on his second deployment to Iraq.

She said several things to me. She said, Marcy, my husband never should have been deployed a second time because he had been injured in his first deployment. He had had a head injury, and she said, I want you to go back to Washington this week and tell the Congress and tell the Secretary of Defense and tell the President of the United States that every soldier who has been in combat in Iraq or in Afghanistan if they have had a head injury, before they are sent back again, they should be examined to make sure that there's nothing wrong, that there isn't a problem that affects their vision or in some way affects their functioning, which she claims is the reason for his death.

Now, if we are rotating people through so quickly and we aren't paying attention to the soldiers who are in

theatre, particularly the Guard and Reserve, which never get the attention that they should, shame on us. Shame on us.

The impact of these head injuries on our soldiers is serious, and with the explosions that are occurring, we are losing 80 percent of those who have lost their lives, 80 percent of our soldiers have died from IEDs, which are explosive devices, or from sniper shots to the back of the head, 80 percent. So the individual soldier is receiving these wounds largely in the head area, or if they have heard the explosive devices going off, they have had damage sometimes inside the head that you can't see. You can't see. So the Department of Defense should have a policy not to redeploy unless that soldier is reexamined.

It's almost like having shaking baby syndrome is what Mrs. Eckhart said to me, where after a baby has been damaged, unless they are really examined, sometimes you can't tell that there has been brain damage. It's no different for our soldiers. She begged me to change the policy of the Department of Defense in this regard.

In addition to that, I met so many soldiers who had come home because the unit returned in 2005, who had other symptoms that are not being treated. There is PTSD inside this particular battalion, but are doctors easily available to them? No. And are they available locally? No. If they are forced to travel somewhere because they are Reserve members, they have got to take off work. Guess what. They have to lose their pay because they have to go to get taken care of at a hospital 2, 3, 4 hours away from them. That's wrong. Those services should be provided to our soldiers when they are ill, particularly if they have something like PTSD, which demands such careful attention from a neuropsychiatrist and the distribution of medicines and the kind of therapeutic care that is important for them.

Another soldier came up to me. He had ripped cartilage and tendons in his knee. He has been home for over 1½ years. He said, Congresswoman, why didn't the DOD operate on me while I was in theater? He said, When I came home, they discharged me. He said, You know what? I came home. I am now in the Reserve. For me to get this taken care of, I will be off work for week. He said, I can't afford to do that. He said, Why didn't they tell me? Why didn't they tell me to take care of it while I was under the umbrella of the Department of Defense?

The PTSD and neurological disorders just in that unit, now that people have been home, while we were at the ceremony, several F-16 jets which are based near a school overhead, you could just see the reaction of the soldiers.

I would invite the President of the United States to urge the Senate of the United States to move that legislation so that we can move the resources we need into the Department of Veterans

Affairs and take care of the veterans of this country, over 100,000 of whom have come home now who are injured.

REPORT ON RESOLUTION PROVIDING FOR CONSIDERATION OF H. RES. 734, EXPRESSING THE SENSE OF THE HOUSE REGARDING WITHHOLDING OF INFORMATION RELATING TO CORRUPTION IN IRAQ

Mr. HASTINGS of Florida, from the Committee on Rules, submitted a privileged report (Rept. No. 110-382) on the resolution (H. Res. 741) providing for consideration of the resolution (H. Res. 734) expressing the sense of the House of Representatives regarding the withholding of information relating to corruption in Iraq, which was referred to the House Calendar and ordered to be printed.

REPORT ON RESOLUTION PROVIDING FOR CONSIDERATION OF H.R. 2102, FREE FLOW OF INFORMATION ACT OF 2007

Mr. HASTINGS of Florida, from the Committee on Rules, submitted a privileged report (Rept. No. 110-383) on the resolution (H. Res. 742) providing for consideration of the bill (H.R. 2102) to maintain the free flow of information to the public by providing conditions for the federally compelled disclosure of information by certain persons connected with the news media, which was referred to the House Calendar and ordered to be printed.

GENERAL LEAVE

Mrs. JONES of Ohio. Mr. Speaker, let me seek unanimous consent that my colleagues will have 5 days within which to revise and extend their remarks on the subject matter of my Special Order.

The SPEAKER pro tempore (Mr. MITCHELL). Is there objection to the request of the gentlewoman from Ohio?

There was no objection.

THE PRESIDENT'S VETO OF BIPARTISAN CHILDREN'S HEALTH INSURANCE BILL

The SPEAKER pro tempore. Under the Speaker's announced policy of January 18, 2007, the gentlewoman from Ohio (Mrs. JONES) is recognized for 60 minutes as the designee of the majority leader.

Mrs. JONES of Ohio. Mr. Speaker, I am pleased once again to host the Congressional Black Caucus message hour on Monday, the first hour of the week.

In the past weeks we have talked about all kinds of issues affecting the American people and have focused on issues particularly affecting African American families. Once again, however, we are compelled to this week focus in on the State Children's Health Insurance Program, which the President chose to veto a couple weeks ago.

This week on the floor of the House we will again be debating SCHIP and the President and our effort to override that veto. I am confident that my colleagues will join me in overriding that veto because they understand the importance of children in the United States having health care.

I am joined this evening by several of my colleagues who will be speaking on this very issue. And I also want to say on behalf of the Chair of the Congressional Black Caucus, CAROLYN CHEEKS KILPATRICK, who appointed me to lead this message hour, I want to thank the American public for listening in to our messages.

I am pleased at this time to yield to my colleague, my good friend, and my sister from Oakland, California, Congresswoman BARBARA LEE.

Ms. LEE. Mr. Speaker, first let me thank the Chair of the Congressional Black Caucus, Congresswoman CAROLYN CHEEKS KILPATRICK, for her leadership and for her vision in making sure that really the conscience of America is heard on these Monday nights. And also let me thank Congresswoman STEPHANIE TUBBS JONES for her leadership and for her vigilance and also, as a member of the Ways and Means Committee, for her strong voice on behalf of our country's children.

I rise tonight in strong support for overriding the President's misguided veto on the State Children's Health Insurance Program.

Does the President want to relegate parents of sick children to frantic calls to 911, late night visits to emergency rooms, and tragic and preventable deaths due to undiagnosed illnesses? The Congress must say no and override his veto Thursday so that our children have access to regular checkups, preventative care, and a primary physician.

We must stand with the American people who overwhelmingly support increasing access to children's health care. We must stand with nearly every single health organization, every single children's organization in America, like the American Medical Association, the American Academy of Pediatrics, the Children's Defense Fund, Easter Seals, the March of Dimes, and countless others who support their bill because they all understand the devastating impact of being uninsured.

We must stand with the largest health insurance trade association in the country, America's Health Insurance Plans, who praised expanding the State Children's Health Insurance Program as a vital step in ensuring the health security of millions of America's children.

Sadly, I believe, like many of us believe, that the President is totally disconnected from the reality of our children's lives. He has asked Congress for another \$190 billion, \$190 billion, to fund his occupation of Iraq, while he has vetoed a fraction of that amount for our children. This is a shortsighted assault on our Nation's children, and we cannot stand for it.

This program is one of the most successful programs in the Nation, and it should be reauthorized and it should be expanded.

When I was a State Senator in California, I helped write the California State program called Healthy Families, and now Healthy Families provides low-cost access to health care for over 800,000 children, more than any other State. The flexibility built into SCHIP has allowed California to provide access to health, dental, and vision coverage for children. And, also, let me just say that if this doesn't get overridden, we don't know what is going to happen in California, like in other States; so this needs to continue.

Comprehensive health coverage for children is also a very vital step towards eliminating the continuing health disparities that plague minority populations, including 800,000 Asian Pacific Americans, 1.4 million African Americans, and 3.4 million Hispanics.

Providing health care coverage for our children is one of the most cost-effective investments that America can make. Children are the least costly to provide coverage for, and giving children access to adequate primary health care will create a generation of healthier, better educated and, in the end, more productive adults.

It's mind-boggling that President Bush vetoed a children's health bill. It is a shame and disgrace that our children are not his priority. So the House must stand with America's 10 million children and vote "yes" to override his veto on Thursday. This is the right thing to do. Voting to override the President's veto is the moral and it is the ethical vote to cast. Our children deserve nothing less.

Let me thank my colleague again from Ohio, Congresswoman STEPHANIE TUBBS JONES, for making sure that the voice of children are heard once again on this floor.

Mrs. JONES of Ohio. I want to engage in a conversation with you just for a moment, Congresswoman LEE.

The cost of providing health care to children is \$3.50 per child. Now, those of us who drink expensive coffee spend more than that on a cup of coffee every day. And wouldn't it just make sense? With all due respect to President Bush, but on this issue he is just totally incorrect. And all the newspapers and organizations are saying just that, that he is incorrect.

Ms. LEE. He is totally incorrect, first of all, and I think that \$3.50 example explains why he's incorrect.

It is about priorities, Congresswoman TUBBS JONES. It is about where we put our tax dollars. Do we care about securing the future of our country? Do we care about our children's future? And that is what this is about. He has asked for \$190 billion, as I said earlier, to continue to fund this occupation in Iraq. Well, I would think that a pittance of that money, when we know how much this would cost, would go to cover our children. And our children deserve it.

Mrs. JONES of Ohio. Mr. Speaker, the amazing thing is he is trying to talk about this whole piece of being conservative, fiscally conservative in the dollars he is expending, but this President has put us in greater deficit than all the Presidents predating him. From George Washington on up to Bill Clinton, he has spent more money. So being fiscally conservative really doesn't make a whole lot of sense.

Ms. LEE. When the President took office, we had a surplus in our country, and now we are in a deficit spending mode. And I will tell you, it is mortgaging and making our children pay for the mistakes of this administration. So we have to dig ourselves out of this. And I think this is a first step to making sure that our children are healthy enough to move forward to be able to take over and try to help figure out how they can secure this country for America's families and children.

Mrs. JONES of Ohio. Thank you, Congresswoman LEE, for leadership in this area but also in the whole HIV/AIDS area. You are a beacon of light for the Congressional Black Caucus and for the Nation. So I thank you for joining me this evening, and I hope you have a great evening.

Ms. LEE. Thank you very much.

Mrs. JONES of Ohio. Mr. Speaker, one thing that we all know is that the Children's Health Insurance Program, the acronym which is SCHIP, State Children's Health Insurance Program, has always been a bipartisan piece of legislation. We have seen Governors from both parties across this country in strong support of the bill. Senate Republicans and Democrats have joined together on a veto-proof vote that the President has ignored. In the House we have strong bipartisan support as well.

I am pleased at this time to yield to my colleague and good friend from Brooklyn, New York, and I hate that we beat the Yankees, but my good friend from New York, YVETTE CLARKE.

Ms. CLARKE. Mr. Speaker, I want to thank the gentlewoman from Ohio for her leadership and for being here to give guidance during this hour for the CBC. And I want to thank our chairwoman, Ms. CAROLYN KILPATRICK, for seeing fit to add this particular perspective to the conversation that we are having with our Nation around the Children's Health Insurance Program in our States.

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And, Mr. Speaker, I'm elated to stand with my colleagues today to once again voice my support, my wholehearted support for children's health insurance coverage, also known as SCHIP.

Just over a week ago, the President vetoed bipartisan legislation that would have provided 10 million American children health coverage through SCHIP. Since the beginning of my tenure here, you know I'm a freshman, in this 110th session, this is the second time the President has vetoed impor-

tant health care legislation with broad bipartisan support; the other veto being an expansion of potentially life saving stem cell research.

Mr. Speaker, it is my honor and duty to stand with my fellow Democrats, telling this administration that this veto will not deter nor distract us from protecting the health and well-being of our children.

The people that I represent in central Brooklyn have spoken loud and clear, and so has the rest of America. Republicans and Democrats alike have expressed their dismay with the President's decision to veto this bipartisan legislation. Additionally, the country overwhelmingly supports the Children's Health Insurance Program. A recent Washington Post-ABC News poll indicates that 72 percent of the country supports the extension and reauthorization of the CHIP program. Governors of both parties across the country support the bipartisan bill.

Now, following the veto, the fight for health insurance for 10 million low-income children moves back to this body where the hard work of rebuilding and building consensus among both Democrats and Republicans has already taken place. Now, the rubber-stamp Republicans who have sided with the President and are standing between 10 million low-income children and their health care must hear from the American people. We will override the President's rejection of health coverage for 10 million children, but the voices of the American people must be heard by those in Washington.

SCHIP was created to provide health care coverage for children and families who earn too much to qualify for Medicaid, but not enough to afford private insurance. It costs, as my colleague, STEPHANIE TUBBS JONES, has already stated, less than \$3 a day to cover a child through the Children's Health Insurance Program.

Ensuring kids is also cost-effective for taxpayers, who pick up the tab for indigent care in emergency rooms, the most expensive way to care for a child's health, as well because a healthy child is more likely to succeed in education and life.

Over the last 10 years, the children's health program has proven to be popular and successful, with 6 million children now enrolled in the program. The bipartisan children's health insurance bill has broad bipartisan support. It's supported by 68 Senators, including 18 Republicans; it's supported by 43 Governors, including 16 Republicans; it's supported by more than 270 organizations representing millions of Americans; and it's supported by a strong majority of the American people.

This bipartisan bill renews and improves the Children's Health Insurance Program, providing health care coverage for 10 million children, preserving coverage for 6 million children currently covered by SCHIP, and extending coverage to nearly 4 million uninsured children according to the nonpartisan CBO.

Ironically, this morning I had an opportunity, along with my colleague, NYDIA VELÁZQUEZ, to attend a press conference hosted by the Working Families Party, ACORN, SCIU and Mothers in Our Community to reach out to a corporation in New York called KKR in midtown Manhattan. This is an investment firm that owns Toys-R-Us and Dollar General. These two toy retailers have already subjected America's families to massive and unprecedented recalls of millions of poisonous lead toys that have flooded the market. This is a great concern. If we don't get a commitment for a code of conduct protecting our children from lead poison, our holiday toy-buying season could mean putting the health of millions of American children at risk.

This concern is compounded by this administration's reckless disregard for our most vulnerable, our children. Just imagine the confluence of two of these things happening at the same time. Right now, parents and families, mothers are concerned about lead-tainted toys. And at the same time, when we need health care coverage that can identify lead poisoning, that can help to ameliorate some of those concerns, because, on the one hand, our safety is not being protected through the consumer protection, we need to have SCHIP in place.

Two-thirds of uninsured children are currently eligible for SCHIP or Medicaid. This bill is simply designed to give States the resources and incentives to enroll children who are eligible but not signed up for SCHIP and Medicare.

Mr. Speaker, I just wanted to be here to say that when we look at communities of color, in particular, black communities across this Nation, it has been this type of safety net health care that enables our communities to grow from strength to strength. These are just those American policies we need to give our families the boost they need so that when children go to school with asthma, they can be treated, they don't have to be out for days on end. When our children have hepatitis, tuberculosis, when they have any type of communicable disease, these diseases can be treated quickly before they reach the level of crisis in the emergency room.

SCHIP gives us that tool to be able to make sure that Americans are safe and secure, that their health and well-being is something that we all value as part of the American fabric of who we are.

And so I want to thank you, STEPHANIE TUBBS JONES, for anchoring this hour for the CBC. When we think about our communities and how critical this legislation is, not only for our communities, but for all Americans, this transcends race, ethnicity, gender. It's American children. I want to thank you for giving me the opportunity to share this time with you.

Mrs. JONES of Ohio. The people of Brooklyn need to know that this con-

gresswoman has come in here, put her running shoes, we call them high-heeled sneakers, put those running shoes on and really has done a fantastic job. We're so very proud of what she's doing, the leadership she's showing; and I thank you for joining me for this message hour this evening.

Ms. CLARKE. Thank you very much.

Mrs. JONES of Ohio. SCHIP, one of the best ways to deliver health care to America's children. SCHIP, one of the best ways and cost-effective ways to deliver health care.

You know, I was stunned when I heard President Bush tell the people of America, well, these children have health care already; all they have to do is go to an emergency room. I don't know how many of you had the opportunity, just very recently, to see the news show talking about how the emergency rooms in this country are overlaid and overburdened by so many people coming into emergency rooms across the country.

In my efforts of obtaining earmarks over the past 4 years in my congressional district, I have sought money for improving the emergency rooms in several hospitals in my congressional district. I've been in the emergency room. I've been there, and the pictures show it, where there are people laying on gurneys in the hallways because there are not enough private spaces for them to use. There are children, seniors, people of all ages in these hospitals and using the emergency room as their primary care. Emergency rooms were created just for that, emergencies, not for the delivery of ongoing preventative care.

And the only way that we can make sure that our children are more healthy, the only way that we can ensure that children who are being educated, they have to be healthy in order to get a good lesson. That's why we started Head Start and we started lunch programs and breakfast programs at school so that children could go to school and they wouldn't be hungry. So now that we're feeding them and they go to school and they're not hungry, we ought to make sure they have health care coverage so they go to school healthy.

And I don't know how many of you there are listening, but I know you've heard the story where your granddaughter or your niece or your nephew or your child goes to a day care facility for the first time and they come home with all kinds of whooping cough or something, running noses, and it's because a lot of young children come to day care without having received any health care. It will make a real difference in the lives of a lot of people if we provide health care to our children, and particularly preventative health care.

The other reason it becomes so important is that an unhealthy child is not going to be able to pay attention in school. An unhealthy child who is not paying attention in school, is not doing

well, is unlikely to do well in junior high school, unlikely to do well in high school, unlikely to make it to college. It may be the precursor to dropping out for a number of children here in the United States of America. And that is why this issue becomes so very important and vital to all of our communities.

Let me just read to you some of the things that some of the national newspapers have said about SCHIP. The Miami Herald said: "Vote to Override the Veto of Children's Health Bill." "President Bush's veto of the children's health insurance bill is like Imelda Marcos denying a barefoot child a pair of shoes." That makes me laugh because I think about all my girlfriends who have lots of shoes, and they're much like Imelda Marcos. "The President complains that expanding health care coverage for low-income children will cost too much and lead to socialized medicine. Neither assertion is true. Now it's up to Congress to override this veto. We urge the Representatives who voted against the bill, most of them Republican, to reconsider. Instead of supporting the questionable priorities of a lame-duck President, they should vote to improve the health prospects of low-income children."

The St. Louis Post-Dispatch said: "Some People, All the Time." "Caring for and protecting children is among the highest values of society, and one of its most crucial obligations. On Wednesday, President Bush vetoed a bill to renew and extend the reach of a program that provides health insurance to American children whose families can't afford it or can't get it at any price. Congress now must stand up for children's health and override the President's veto. Mr. Bush's misleading rhetoric calls to mind the warning about gullibility made by a very different Republican President, Abraham Lincoln. As Congress prepares to override the President's veto, those who voted against the SCHIP plan should take care to ensure that they're not fooled all the time."

The Philadelphia Inquirer: "The SCHIP Veto: Children Last." "There was no convincing reason for President Bush to deliver on his long-standing threat of veto for the SCHIP bill other than that he hoped to score political points. Bush's stated reason for opposing the congressionally approved \$35 billion increase in the program was that somehow it was a step towards socialized government-run medical coverage benefiting low-income families. That doesn't square with the facts, since most of the kids helped by the program are in working-class households. And it doesn't jive with the widespread support for SCHIP among the American public, not to mention the impressive number of Republicans who backed the veto measure. So it's difficult to see how the President's strategy on SCHIP puts any more children first."

The Columbus Post-Dispatch: "Veto Lament." "President Bush's veto yesterday of the expansion of SCHIP not only leaves millions of children without health care coverage; it can leave many of Bush's fellow Republicans exposed to political attacks in next year's election. Bush said the expansion passed by Congress would cost too much. At \$35 billion over 5 years, it certainly is expensive, but this investment in the health of America's children will pay big dividends. Healthy children do better in school and in life. And those who get well-child care in a doctor's office take some of the burden off the Nation's crowded emergency rooms, saving on medical costs overall. Congress' plan, which has the support of the public and backers from both sides of the aisle, would add 4 million children to the rolls."

The Seattle Post Intelligencer: "Children's Health: Overturn the Veto."

It said: "In vetoing a much-needed expansion of children's health coverage, President Bush distorted the issues, put partisanship over compassion, and defied the goodhearted will of the public."

And finally, in terms of newspaper endorsements, Waterloo-Cedar Falls Courier of Iowa: "Bush Should Have Compromised on SCHIP Program." "President Bush's veto Wednesday of a bill that could have dramatically expanded children's health insurance came as no surprise. He had promised to do so even before a compromise was hammered out in Congress. Bush's determination, in the face of bipartisan support for the bill and with polls showing the bill is favored by nearly two-thirds of Americans, is troubling."

All of these newspapers have said pointblank that President Bush is wrong on this issue, that President Bush should not use this as a political partisan dagger, that he should move forward and allow the children of America across the board to have access to health care coverage.

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The other reason this bill becomes so very important is because a lot of employers no longer are providing health care coverage for their employees. A number of employees can't afford the health care coverage that employers provide. So it is particularly important for these young children to have access to well care, as well.

Let me tell you what Senator CHARLES GRASSLEY, Republican, said, "The President's understanding of our bill is wrong. I urge him is to reconsider his veto message." Senator ORRIN HATCH, another Republican, said, "We are talking about kids who basically don't have coverage. I think the President had some pretty bad advice on this." I want to echo that. I think whoever is advising President Bush on this issue is doing a detriment to the President as well as a detriment to the people of America. Senator SUSAN COL-

LINS, a Republican, has said, "I can't believe the President would veto a program that benefits low-income children." I couldn't believe it either, Senator COLLINS. He should not have vetoed it. But he did. So our job, as Members of Congress, is to override this veto on Thursday of this week.

Today, 50 million Americans have no health insurance. That includes more than 8 million children. Eight out of the 10 uninsured Americans either work or are in working families. Jesse Jackson, when he was running for President, Rev. Jackson, used to use the term the "working poor." They get up every morning. They go to work. They work 40, 50 hours a week. They come home every evening. The kind of money that they are receiving, even with the increase in minimum wage, still puts them below or within 200, 250 percent of poverty. So not only do we have poor people who are with no income or low income, we have working poor who need health care coverage.

My colleague, BARBARA LEE, spoke to earlier the whole issue of disparity in health care. The studies say that an African American male and a Caucasian male can have the same health care coverage but that the delivery of that health care to the African American male is less than the delivery to the Caucasian male. There are all kinds of disparities in what is going on in health care in our Nation, and this is one of the ways that we can level the playing field. We can get rid of some of the disparities within our support of SCHIP.

Being uninsured means going without needed care. It means minor illnesses become major ones because care is delayed. Tragically, it also means that one significant medical expense can wipe out a family's life savings. Right now, everybody is talking about the problem with the mortgage industry, and one of the reasons there are a significant number of foreclosures and bankruptcies is because there are families who have had to pay for health care coverage, and as a result of being required to pay for health care coverage, they are losing their houses. That should not be happening. There are millions of working uninsured Americans who go to bed every night worrying what will happen to them and their families if a major illness or injury strikes.

In Ohio, my home State, there are currently 1,362,000 uninsured. It is an increase of 18,000 people since 2003. We have also seen this drain on many of the local hospitals in my district when people are forced to use emergency rooms. The problem is getting worse. As the price of health care continues to rise, fewer individuals and families can afford to pay for coverage. Fewer small businesses are able to provide coverage for their employees, and those that do are struggling to hold on to the coverage.

It is a problem that affects all of us. We cannot sit idly by while the people

of this country continue to go without health care coverage. We must continue to push. And today is Monday. On Thursday, this House will vote to override the veto of SCHIP. Those of you who are listening across this country, if you have not contacted your Member of Congress, if you have not contacted your Senator and said to them that they need to vote to override this veto, I encourage you to fax, call, e-mail, stop by the office, whatever you need to do so that we can advocate on behalf of our people. This will be an opportunity this week for the people of America to stand up and say to this President that health care is a priority for us. But more importantly, health care coverage for our children is our highest priority.

I am pleased to have had the opportunity to work on the Health Subcommittee of the Ways and Means Committee. I wanted to get on that committee because that is an opportunity for me to be engaged in long-term policy development of health care in this country. In my congressional district, the largest employers are the health care industry. We have a large number of hospitals. I want to work to assure the people of the 11th Congressional District that they are going to have access to health care. I want to work to assure that people of America, black, white, brown, yellow, that we are working in order to make sure that they have health care coverage.

It has been a privilege to serve on the Health Subcommittee with my good colleague, PETE STARK, from California and a privilege to serve on the Ways and Means Committee under the leadership of CHARLES RANGEL. I have the privilege of leading this Special Order, this message on behalf of the Congressional Black Caucus and our leader CAROLYN CHEEKS KILPATRICK. It is so very, very important that we continue, the Congressional Black Caucus continues to lead on these issues. I am pleased to have the opportunity to lead this message hour in and around SCHIP this week.

Again, everyone needs to pay attention to this issue and pull out all the stops and say to President Bush that we are going to override your veto. We understand that you have chosen to go down the wrong path, that you are reaching out to the wrong people and supporting the wrong people. And you are overlooking the most important group of people in our country, and that is our children.

Ms. JACKSON-LEE of Texas. Mr. Speaker, let me thank my dear friend, Ms. TUBBS JONES of Ohio, for organizing this special order on the very important subject of SCHIP Reauthorization. I have very serious concerns about the compromised SCHIP legislation that will come before this House later this week. My major concern is that the version of the legislation that will come before the House in response to the President's veto will be even less expansive than the version the House voted on previously.

This is extremely important because reauthorization of SCHIP is crucial to closing the

racial and ethnic health disparities in this country. Narrowing health care coverage of our children, as this newly agreed upon version does, clearly falls far short of the goal that we had hoped for in our efforts to decrease health disparities. It is crucial that this Congress continue to bring awareness to the many health concerns facing minority communities and to acknowledge that we need to find solutions to address these concerns. My colleagues in the Congressional Black Caucus and I understand the very difficult challenges facing us in the form of huge health disparities among our community and other minority communities. We will continue to seek solutions to those challenges.

Reauthorization of the SCHIP is crucial to realizing those solutions. However, we must not compromise away the health of millions of children who will under this new SCHIP version go without health care coverage. It is imperative for us to improve the prospects for living long and healthy lives and fostering an ethic of wellness in African-American and other minority communities. I thank all of my CBC colleagues who have been toiling in the vineyards for years developing effective public policies and securing the resources needed to eradicate racial and gender disparities in health and wellness.

We know that the lack of healthcare contributes greatly to the racial and ethnic health disparities in this country, so we must provide our children with the health insurance coverage to remain healthy. SCHIP, established in 1997 to serve as the healthcare safety net for low-income uninsured children, has decreased the number of uninsured low-income children in the United States by more than one-third. The reduction in the number of uninsured children is even more striking for minority children.

In 2006, SCHIP provided insurance to 6.7 million children. Of these, 6.2 million were in families whose income was less than \$33,200 a year for a family of three. SCHIP works in conjunction with the Medicaid safety net that serves the lowest income children and ones with disabilities. Together, these programs provide necessary preventative, primary and acute healthcare services to more than 30 million children. Eighty-six percent of these children are in working families that are unable to obtain or afford private health insurance. Meanwhile, health care through SCHIP is cost effective: it costs a mere \$3.34 a day or \$100 a month to cover a child under SCHIP, according to the Congressional Budget Office. There are significant benefits of the State Children's Health Insurance Program when looking at specific populations served by this program.

MINORITY CHILDREN

SCHIP has had a dramatic effect in reducing the number of uninsured minority children and providing them access to care:

Between 1996 and 2005, the percentage of low-income African American and Hispanic children without insurance decreased substantially.

In 1998, roughly 30 percent of Latino children, 20 percent of African American children, and 18 percent of Asian American and Pacific Islander children were uninsured. After enactment, those numbers had dropped by 2004 to about 12 percent, and 8 percent, respectively.

Half of all African American and Hispanic children are already covered by SCHIP or Medicaid.

More than 80 percent of uninsured African American children and 70 percent of uninsured Hispanic children are eligible but not enrolled in Medicaid and SCHIP, so reauthorizing and increasing support for SCHIP will be crucial to insuring this population.

Prior to enrolling in SCHIP, African American and Hispanic children were much less likely than non-Hispanic White children to have a usual source of care. After they enrolled in SCHIP, these racial and ethnic disparities largely disappeared. In addition, SCHIP eliminated racial and ethnic disparities in unmet medical needs for African American and Hispanic children, putting them on par with White children. SCHIP is also important to children living in urban areas of the country. In urban areas: One in four children has healthcare coverage through SCHIP. More than half of all children whose family income is \$32,180 received healthcare coverage through SCHIP.

TEXAS CHILDREN

The reauthorization of SCHIP is crucial for children in Texas. Texas has the highest rate of uninsured children in the nation, and Houston/Harris County the highest in the state. The SCHIP would go a long way to provide coverage for the 585,500 children enrolled in Texas's CHIP program; and to reach the 998,000 children in families with incomes under the 200 percent Federal Poverty Level (FPL) who remain uninsured.

Almost 40 percent of young children in Houston lack immunizations that help prevent deadly childhood illnesses like measles, mumps, pneumococcal disease and whooping cough. I applaud the efforts of the Houston Department of Health and Human Services (HHDHS), the Harris County Public Health and Environmental Services (HCPHES), the Texas Department of State Health Services (DSHS), Texas Children's Hospital, the Rotary Club of Houston, and the national organization Every Child By Two (ECBT) who have created a new partnership and campaign, "Immunize On Time, Every Time" to increase vaccination rates among Houston's infants and toddlers. To sustain programs such as these, we need to provide our children with the health insurance coverage they so desperately need and deserve.

According to the Immunization Bureau, Houston Department of Health and Human Services, Houston's childhood immunization rates are below average for both Texas and the country, leaving our children—and our wider community—vulnerable to potentially life-threatening illnesses.

In Texas, the SCHIP bill is the only hope for securing health care and increasing the quality of all aspects of health care for our children. Far too often in Texas, those who lack health care coverage frequently delay seeking medical care until they are seriously ill. That fact does nothing more than exacerbate the health care problem because it leads to the overload of emergency rooms which are required by law to treat them even if the patient has no ability to pay. Since emergency care is far more expensive than a scheduled visit to a doctor or clinic, hospitals end up with large costs that they, in turn, pass on to insured patients using their overtaxed facilities. As a result, insurance companies raise their rates even higher to cover the increased payouts, making their policies too expensive for more working families. The result is a health care

system spiraling out of control and more children left unprotected and in poor health. Reauthorization of SCHIP would reverse this trend.

CHILDREN IN URBAN AREAS

SCHIP is also important to children living in urban areas of the country. In urban areas: One in four children has healthcare coverage through SCHIP. More than half of all children whose family income is \$32,180 received healthcare coverage through SCHIP.

CHILDREN IN RURAL COMMUNITIES

SCHIP is significantly important to children living in our country's rural areas. In rural areas: One in three children has health care coverage through SCHIP or more than half of all children whose family income is under \$32,180 received healthcare coverage through Medicaid or SCHIP. Seventeen percent of children continue to be of the 50 counties with the highest rates of uninsured children, 44 are rural counties, with many located in the most remote and isolated parts of the country. Because the goal is to reduce the number of uninsured children, reauthorizing and increasing support for SCHIP will be crucial to helping the uninsured in these counties and reducing the 17 percent of uninsured.

Mr, Speaker, I would much rather have extended the deadline for reauthorization of SCHIP, while we diligently and reasonably consider the unsettled issues in this debate so that millions of the most vulnerable population, including many African American and other minority children can receive the health care coverage they need to remain healthy and develop into productive citizens of this great country. It is not as important to reauthorize an inferior bill under pressure of fast-approaching deadlines, as it is to ensure that we provide health care to those children who remain vulnerable to health disparities. I urge my colleagues to join me in ensuring health care coverage for millions of children and reducing health disparities among the most vulnerable populations.

I will continue to fight vigorously to ensure that we provide health coverage for millions of this nation's uninsured children. As leaders of this great nation, we have no other choice. The health of our children should not be compromised while we spend billions of dollars in other countries in the name of ensuring the health and safety of our international neighbors. While it is honorable to love thy neighbor as thyself, charity must certainly begin at home.

There is no reason why this country should continue down a dreadfully deleterious road of denying healthcare to any citizen of this country who needs it. Many of the health conditions, such as diabetes, obesity, kidney failure, cancer, hypertension and HIV/AIDS, the prevalence of which plagues minority communities most, could be curtailed or even prevented if everyone had access to health insurance. I will continue to fight hard for the most effective policy measures that aim to narrow the racial health disparity gap.

Mrs. JONES of Ohio. Mr. Speaker, I am very pleased to have been granted this message hour, and I am very pleased to yield back my time early so that the next Special Order can begin.

HOUSE RESOLUTION 106, THE
ARMENIAN GENOCIDE

The SPEAKER pro tempore. Under the Speaker's announced policy of January 18, 2007, the gentlewoman from North Carolina (Ms. FOXX) is recognized for 60 minutes as the designee of the minority leader.

Ms. FOXX. Mr. Speaker, I appreciate very much that recognition, and I appreciate the Republican leader giving me this opportunity tonight to participate in our Special Order.

I am here tonight to talk about something that happened last week in the Foreign Relations Committee and to talk about something that is proposed to happen here in the House between now and the middle of November when we are supposed to be taking a break for Thanksgiving. I am here to talk about House Resolution 106, the Armenian genocide resolution. I am, as I have said before here many times, an extremely proud Member of the House of Representatives. I am so pleased to be able to represent the people of the Fifth District of North Carolina. However, when I came here, I took an oath, an oath to defend the Constitution and uphold the Constitution. I did not take an oath to say that I would ignore the good of the United States for the good of the Fifth District of North Carolina.

I thought that everyone who came here understood that our Number 1 responsibility is to work together as a group on behalf of the entire United States of America. Certainly we should do all we can to represent our districts, and I believe that every Member does that. But there are times when we must put aside provincial interest for the good of this country.

I am very disappointed that last week the Foreign Relations Committee voted out of that committee a resolution that I think puts the good of the United States in second place to the good of a small interest group. We should never do that as Members of Congress. We should assume that the oath that we take is like the doctor's oath, above all, do no harm. The resolution that was passed out of that committee last week does harm to the United States of America and does harm to people in Turkey and in other parts of the world. That is not what we should be about. The action that was taken last week and the proposed action for a vote on the floor by the entire House has been called by many others the most irresponsible act of this Congress. I agree with that.

I am particularly concerned that the Speaker of the House is the person pushing this resolution. She is third in line to be President of the United States. And exhibiting behavior that shows such provincial interest does not give me great comfort in thinking that if something were to happen and the Speaker were to assume the Presidency, that she would have the presence of mind to do what needs to be done for the good of this country. It is simply not being exhibited by her be-

haviors, by pressing this resolution and by other things that she has done. I am quite concerned about it.

Many people have written this Speaker, many editorials have been written saying, don't do this. This will do harm to the United States. This will do harm to Armenians. This is not the right thing to do.

I want to talk a little bit about the history of Turkey, our relationship with Turkey, and give a little bit of background to people who may not be so familiar with Turkey as a country and with what has happened there and talk about why, again, this resolution is so wrong not just at this time, but at any time in the history of this country. The Republic of Turkey was formally established on October 29, 1923, with the leadership of Mustafa Kemal Ataturk. He was the visionary leader of modern Turkey and became its first president. You see, Turkey wasn't even a country in 1915 at the time that the events that are being discussed in House Resolution 106 are talked about. The fall of the Ottoman Empire was occurring during that period of time. And so bringing these charges against Turkey is wrong because Turkey didn't exist as a country.

Turkey is the only secular pluralistic westward-looking democracy with a predominantly Muslim population. I have been to Turkey. I have been to Turkey several times. I have gotten to know the Turkish people and know them for the wonderfully warm, kind, intelligent and entrepreneurial people that they are. We are so fortunate to have them as our ally. Turkey has a significant and constructive physical and influential reach in the Balkans, the Middle East, the Caucasus and Central Asia. The United States and Turkey share common values of democracy, diversity, tolerance, social mobility, the separation of religious and civic life.

Anatolia, the home of the Republic of Turkey, has been the cradle of civilizations for millennia. The city-states of the Lycian Federation located in Patara, Turkey, inspired the Founding Fathers of the United States as they wrote the Constitution of the United States. Indeed, there is a figure of Suleyman here in the House Chamber. We recognize Suleyman as one of the great lawgivers of the world.

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Again, the United States and Turkey have been close friends and allies for more than half a century. Turkish Americans are leaders in many walks of life, ranging from the arts, science, academia and business, and have a proud heritage. Turkish Americans are good-will ambassadors of the friendship between the United States and Turkey. In celebrating their rich cultural heritage, Turkish Americans enrich society in the United States and the United States' understanding of that part of the world.

Mr. Speaker, Turkey is becoming a reliable energy hub for the Western

world, in a highly volatile region, completing the East-West Energy Corridor. For decades, Turkey has stood as the bulwark of the North Atlantic Treaty Organization, NATO, on the southeastern flank of the alliance, and guarded a long common border with the Soviet Union.

Turkey has become an important partner of the United States in facing new, major challenges, such as international terrorism, ethnic and religious extremism and fundamentalism, energy and security and diversity, proliferation of weapons of mass destruction and international organized crime, including drug and human trafficking. This has been especially true since the Cold War ended.

In July, 2006, the United States and Turkey signed a "shared vision document" outlining a strategic vision for bilateral cooperation and coordination on a wide range of international matters of common concern. In 2006, and so far in 2007, Turkey has been the 30th largest market for United States exports and the 44th largest source of imports.

Mr. Speaker, Turkey continues to play an important role in Afghanistan, having twice commanded the International Security Assistance Force, and maintains a provincial reconstruction team in Afghanistan which builds hospitals, schools and roads. It plays a crucial role in helping supply services and equipment to United States forces in Iraq.

Turkey, again, has had an extraordinarily proud history and has been a very close collaborator with the United States in doing good things all over the world, but especially in its part of the world. We as Americans need to recognize the important role that Turkey has played, again, from the early millennium, and the importance that it plays in keeping peace in that part of the world.

I had the opportunity to go to Turkey in May of this year, along with five other Members of Congress. There were three Democrats and three Republicans. We visited the Armenian Patriarch and we visited the Jewish community while we were there. We visited all the major players in the Turkish government while we were there.

Turkey this year has gone through some challenges to its constitution. It has worked out those challenges. It has held elections. It has gone through some crises and handled them extremely well. We are very proud of the way that all of those things have been handled.

When we talked with people in Turkey, we heard over and over and over again how devastating this resolution would be to our relationship with the Turkish people. We heard from the Armenians in Turkey that this was a mistake. They told us over and over again that this is something people in the United States are pushing, that Armenians in the United States are pushing. They said "We do not want this done.

We are working out our differences here in Turkey, and working them out very well. Please do not pass this resolution.”

My three Democratic colleagues who went on that trip are all opposed to this resolution. The Republicans are opposed to it. This is a mistake. The Speaker should not be pandering to people in her own district and risking the friendship that we have with Turkey, and indeed risking our military endeavors in the Middle East. But that is what she's doing.

Again, I want to say that many people have called this the most irresponsible act of this Congress. I think that that is appropriate.

Mr. Speaker, let me share with you some other people who have expressed their interest and concern and opposition to this resolution. Eight former Secretaries of State, Democrats and Republicans, sent a letter to Speaker PELOSI. I want to quote from that letter, dated September 25, 2007:

“We are writing to express concern that H. Res. 106 could soon be put to a vote. Passage of the resolution would harm our foreign policy objectives to promote reconciliation between Turkey and Armenia. It would also strain our relations with Turkey and would endanger our national security interests in the region, including the safety of our troops in Iraq and Afghanistan.

“We do not minimize or deny the enormous significance of the horrible tragedy suffered by ethnic Armenians from 1915 to 1923. During our tenures as Secretaries of State, we each supported Presidential Statements recognizing the mass killings and forced exile of Armenians. It has been longstanding U.S. policy to encourage reconciliation between Turkey and Armenia and to urge the government of Turkey to acknowledge the tragedy. We understand the administration continues to urge the Turkish government to re-examine its history and to encourage both Turkey and Armenia to work towards reconciliation, including normalizing relations and opening the border.

“There are some hopeful signs already that both parties are engaging each other. We believe that a public statement by the U.S. Congress at this juncture is likely to undermine what has been painstakingly achieved to date.”

They go on to say: “We must also recognize the important contributions Turkey is making to U.S. national security, including security and stability in the Middle East and Europe. The United States continues to rely on Turkey for its geostrategic importance. Turkey is an indispensable partner to our efforts in Iraq and Afghanistan, helping U.S. troops to combat terrorism and build security. By providing the U.S. military with access to Turkish airspace, military bases and the border crossing with Iraq, Turkey is a linchpin in the trans-shipment of vital cargo and fuel resources to U.S. troops, coalition partners and Iraqi civilians.

“Turkish troops serve shoulder to shoulder with distinction with U.S. and other NATO allies in the Balkans. Turkey is also a transit hub for non-OPEC oil and gas, and remains key to our efforts to help the Euro-Atlantic community bolster its energy security by providing alternative supply sources and routes around Russia and Iran.

“It is our view that passage of this resolution could quickly extend beyond symbolic significance. The popularly-elected Turkish Grand National Assembly might react strongly to a House resolution, as it did to a French National Assembly resolution a year ago. The result could endanger our national security interests in the region, including our troops in Iraq and Afghanistan, and damage efforts to promote reconciliation between Armenia and Turkey. We strongly urge you to prevent the resolution from reaching the House floor.”

It is signed by eight former Secretaries of State, and I will submit this for the record with their signatures.

There is another letter sent to the Speaker of the House by three former Secretaries of Defense dated September 7, 2007.

“We write today to convey our deep concern regarding the damage that passage of H. Res. 106 could do to relations between the United States and Turkey, a long-time NATO ally and a country which plays a critical role in supporting the U.S. national security interests in the Balkans, greater Middle East, the Black Sea region and Afghanistan.

“The depth and breadth of our defense and security relationship with Turkey are considerable, and, as former Secretaries of Defense, we value Turkey's friendship and partnership. Turkey makes numerous and substantial contributions to U.S. goals and interests abroad, including its close relationship with Israel, its deployment of military forces to the Balkans and its contribution to the NATO effort to defeat terrorism and support democracy in Afghanistan.

“Just as public opinion plays a crucial role in our own country, the reaction of the Turkish public to the passage of H. Res. 106 would be considerable. Passage of H. Res. 106 would have a direct detrimental effect on the operational capability, safety and well-being of our armed forces in Iraq and in Afghanistan, because the Turkish parliament would likely respond to the Turkish public's call for action by restricting or cutting off U.S. access to the Turkish air base at Incirlik and closing the crossing into Iraq at the Habur Gate. The Turkish parliament would also likely retract blanket flight clearances for U.S. military overflights, which are vital to transporting supplies and fuel to our troops.

“We also believe the increasingly open debate about this issue in Turkey would surely be restricted by negative public reaction to U.S. congressional action. We are also concerned that any

potential steps toward better relations between Turkey and Armenia will be set back by any action in the U.S. Congress.

“In stating our opposition to H. Res. 106, we do not suggest that anything other than the most terrible of tragedies took place as the Ottoman Empire disintegrated in the early part of the last century. As President Bush and other presidents before him have done, we recognize the need to acknowledge and learn from the tragedy.

“We respect that this issue is of great concern to you, and hope that you can consider other appropriate ways to highlight, commemorate and honor the memory of the victims, without doing damage to our contemporary relations with modern Turkey.”

Again, I will submit this letter for the RECORD.

Editorials have come out in most of the major newspapers, newspapers that are not generally opposed to the Speaker. The Washington Post editorial was titled “Worse Than Irrelevant.”

“A congressional resolution about massacres in Turkey 90 years ago endangers present day U.S. security. It is easy to dismiss a nonbinding congressional resolution accusing Turkey of “genocide” against Armenians during World War I as frivolous,” and “genocide” is in quotations. “Though the subject is a serious one, more than 1 million Armenians died, House Democrats pushing for a declaration on the subject have petty and parochial interests.

“The problem is that any congressional action will be taken in deadly earnest by Turkey's powerful nationalist politicians, and therefore its government, which is already struggling to resist a tidal wave of anti-Americanism in the country.”

I am going to submit this entire editorial also, because it refers again to some of the letters that I have already read. But the Washington Post has said this is worse than irrelevant, because it will do harm. Again, what we should practice here is the same thing that doctors practice: Above all else, do no harm.

There is an excerpt from an editorial in the Wall Street Journal, October 2, 2007. “History is messy enough without politicians getting into the act. As a general rule, legislatures in far-off countries ought to think carefully before passing judgment on another people's history. When their sights turn in that direction, it is a fair bet that points are to be scored with powerful domestic lobbies. Playing with history often complicates the implementation of foreign policy goals as well. Politicians are paid to think about the future, not the past. Many would say, why are we doing this? Why should the Congress not be dealing with the future, instead of the past?”

I question that too, and I am going to come back to that in a minute in terms

of what may be one of the real underlying reasons for all of these things coming out.

□ 2045

Some have said that Congress rarely holds the key to America's foreign relations with a critical ally. But now with Turkey, the only Muslim country in the world allied with the United States and NATO, the future of Turkish-American relations are very much in the hands of the Congress.

This is from a survey conducted by Terror Free Tomorrow, an organization that did a survey in Turkey earlier this year. It was the first nationwide public survey of Turkey on the issue and what the survey found was that it would actually set back the cause it purports to achieve, namely Turkey's recognition of its own past and reconciliation with Armenia today.

I have a chart on this showing 78 percent of the Turkish people who were surveyed opposed this resolution, any congressional resolution dealing with the Armenian situation. Almost three-quarters of them felt that passage of an Armenian regulation resolution would worsen their opinion of the United States. Only 7 percent favored no action by the government or favored such a resolution. And three-quarters of Turks, though, would accept scholarship by independent historians on what occurred between Turks and Armenians during 1915.

Also, Turks do not consider the U.S. Congress a neutral judge of this issue. Instead, they see the resolution as driven by anti-Muslim feelings and American domestic politics. And 73 percent of Turks think a resolution will have the opposite effect and actually worsen relations between Turkey and Armenia. Again, this was a poll done in January and February of this year by Terror Free Tomorrow and the ARI Foundation. These are groups that wanted to study this issue to gather information to help people be informed of what the effect would be. The survey was done all over the country of Turkey, and the views that were held were held firmly regardless of age, income, education, or even their present view of the United States.

And 84 percent of those who now have a very favorable opinion of the United States responded that their opinion would deteriorate if the resolution were to pass. And of course the resolution has passed in the committee and the Speaker has said that she will bring it to the floor for a vote which most people in Turkey believe would be a terrible, terrible mistake.

Turkey again is a stable, moderate Muslim democracy. It is our most strategic and valuable Muslim ally. This resolution would help the cause of those extremists in Turkey who wish to reduce the nation's ties with the United States. It would discredit those within Turkey who continue to call for greater openness and plurality.

The Turkish people who answered the survey felt that it would alienate the

Armenians and the Turks who through fits and starts have been slowly moving toward reconciliation of this important and divisive historical question. It could scuttle dialogue to establish a joint commission to examine the events of 1915.

Turkey is a country of considerable nationalism. The passage of this resolution would likely produce a nationalistic backlash against the United States. The whole issue of probing and making amends for the wrongs of history would be completely lost in this onslaught of Turkish nationalism. It would probably dramatically and perhaps permanently damage U.S. relations with Turkey.

As the Turkish community of Turkey recently said in a statement: "What happened to the Armenians of the Ottoman Empire during World War I—death, destruction, displacement—was a terrible tragedy, but eminent historians do not agree whether the term 'genocide' is the appropriate description of that tragedy." I certainly agree with that.

In another article by the Washington Post it said: "It is true that Turkey's military and political class has been slow to come to terms with the history and virulent nationalism, but Turkish writers and intellectuals are pushing for a change in attitude and formal and informal talks between Turks and Armenians are making slow progress. A resolution by Congress would probably torpedo rather than help such efforts. Given that reality and the high risk to vital U.S. security interests, the Armenian resolution cannot be called frivolous. In fact, its passage would be dangerous and grossly irresponsible."

Now I want to go to a piece that has been written that I certainly hope is not true. Jed Babbin, Deputy Under Secretary of Defense in President George H.W. Bush's administration, has written in Human Events magazine: "According to Defense Secretary Robert Gates, Incirlik Air Base near Adana, Turkey, is the transshipment point for about 70 percent of all air cargo, including 33 percent of the fuel going to supply U.S. forces in Iraq. Included are about 95 percent of the new MRAP, mine-resistant ambush protected vehicles, designed to save the lives of American troops.

"Turkey's Erdogan government has indicated that if the House of Representatives takes action on a non-binding resolution being pushed by Speaker PELOSI, Turkey might revoke our ability to use Incirlik as a waypoint for Iraq supplies."

And Mr. BOEHNER has said if the Turks cut off our ability to use Incirlik, there is no question this could jeopardize our troops on the ground in Iraq. And, frankly, if this is just the latest in the Democrat string of backdoor attempts to force a retreat against the war against al Qaeda, it is certainly the most dangerous."

Mr. Babbin comes to a chilling conclusion in his analysis of the resolution

and its impact on our Nation's relations with the nation of Turkey. This is what gives me great pause. He writes: "Speaker PELOSI is apparently so intent on forcing an end to American involvement in Iraq that she is willing to interfere in our tenuous friendship with Turkey. When she does, it will be an historic event. The House of Representatives will be responsible for alienating a key ally in time of war and possibly interdicting supplies to U.S. troops." If his prediction proves true, it will be a low point for the history of this noble body.

I hope that what Mr. Babbin is saying is not true. I hope that this is not an attempt by the Speaker to sabotage our efforts in Iraq and in Afghanistan because it puts our troops in harm's way and we have been hearing over and over again that this is not what she wants or that others in the majority want. But it would have the effect of doing that. We as Members of Congress should never take a position that would in any way put our troops in harm's way.

I am urging the Speaker to rethink her statements that she will put this resolution, H. Res. 106, on the floor for a vote. It is a nonbinding resolution. It will go nowhere else. People outside here don't understand how these resolutions work, but it would not go to the Senate to be passed. It would not go to the President to be vetoed as I feel certain the President would veto if it went there. It is a resolution only from the House of Representatives. This is a body that is capable of doing so much good, but we also have the capability of doing harm. We should practice again what physicians take an oath to do: Above all, do no harm.

I urge the Speaker: rethink your commitment to put H. Res. 106 on the floor for a vote. Realize the significant responsibility that has been given to you not just as a Member of the House of Representatives but as the Speaker of the House of Representatives, an extraordinarily great honor, the first woman in this country to be named Speaker of the House.

What message are we sending to our troops if we pass such a resolution or even consider such a resolution that puts our troops in harm's way, damages our relationship with a country that has been such a wonderful ally to us and does damage to our relationship for a long, long time to a government that has been working very hard to do the right things, to promote democracy in the Middle East, to shore up other countries that are working to promote democracy. What messages are those going to send to other people.

I urge the Speaker to rethink her commitment to put this resolution on the floor. I urge the Speaker to get above petty and parochial interests, to think about the tremendous responsibility she bears as the Speaker of the House.

We are not often involved in foreign relations on the scale that we are being

asked to be involved in the House at this time. It is an awesome responsibility. We all should remember that we have taken an oath to defend the Constitution and to defend this country. Bringing such a resolution to the floor will do damage to our country, to our relationship with a valued ally, and I believe ultimately will do harm to our efforts to bring peace and stability to the Middle East.

I urge the Speaker to rise above again petty parochialism, come to the realization that this is an extremely serious matter that needs to be dealt with in a very different way than it has been dealt with thus far, and reject petty parochialism in favor of looking to the larger issue, looking to the future, not to the past, and helping the Armenians and the Turks come to grips with this difference of opinion that they have, resolve it within their own country, keep the United States looking for those things that are important to the United States, not getting involved with the internal affairs of other countries and promoting peace and stability in the Middle East.

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Let us let the 110th Congress not be thought of as passing the most irresponsible resolution that could be passed in this session of Congress. Let us focus on positive things, things that will move this country forward and not things that will do harm to this country, to other countries and, most of all, not to our troops serving overseas, protecting us so we can be here to practice the free speech that they make possible for us.

I will insert the material I previously referred to in the RECORD at this point.

TCA ISSUE PAPER 25

October 1, 2007. Former Secretaries of State and Defense Object to H. Res. 106

The following letters have been sent to the Honorable Nancy Pelosi, Speaker of the House of Representatives, by former U.S. Secretaries of State and former U.S. Secretaries of Defense voicing their objection to House Resolution 106, which asks for U.S. recognition of Armenian allegations of genocide.

LETTER BY SECRETARIES OF STATE TO
SPEAKER PELOSI

SEPTEMBER 25, 2007.

Hon. NANCY PELOSI,
Speaker, House of Representatives, Washington, DC.

DEAR MADAM SPEAKER: We are writing to express concern that H. Res. 106 could soon be put to a vote. Passage of the resolution would harm our foreign policy objectives to promote reconciliation between Turkey and Armenia. It would also strain our relations with Turkey, and would endanger our national security interests in the region, including the safety of our troops in Iraq and Afghanistan.

We do not minimize or deny the enormous significance of the horrible tragedy suffered by ethnic Armenians from 1915 to 1923. During our tenures as Secretaries of State, we each supported Presidential statements recognizing the mass killings and forced exile of Armenians. It has been longstanding U.S. policy to encourage reconciliation between Turkey and Armenia and to urge the govern-

ment of Turkey to acknowledge the tragedy. We understand the Administration continues to urge the Turkish government to reexamine its history and to encourage both Turkey and Armenia to work towards reconciliation, including normalizing relations and opening the border. There are some hopeful signs already that both parties are engaging each other. We believe that a public statement by the U.S. Congress at this juncture is likely to undermine what has been painstakingly achieved to date.

We must also recognize the important contributions Turkey is making to U.S. national security, including security and stability in the Middle East and Europe. The United States continues to rely on Turkey for its geo-strategic importance. Turkey is an indispensable partner to our efforts in Iraq and Afghanistan, helping U.S. troops to combat terrorism and build security. By providing the U.S. military with access to Turkish airspace, military bases, and the border crossing with Iraq, Turkey is a linchpin in the transshipment of vital cargo and fuel resources to U.S. troops, coalition partners, and Iraqi civilians. Turkish troops serve shoulder-to-shoulder with distinction with U.S. and other NATO allies in the Balkans. Turkey is also a transit hub for non-OPEC oil and gas and remains key to our efforts to help the Euro-Atlantic community bolster its energy security by providing alternative supply sources and routes around Russia and Iran.

It is our view that passage of this resolution could quickly extend beyond symbolic significance. The popularly elected Turkish Grand National Assembly might react strongly to a House resolution, as it did to a French National Assembly resolution a year ago. The result could endanger our national security interests in the region, including our troops in Iraq and Afghanistan, and damage efforts to promote reconciliation between Armenia and Turkey. We strongly urge you to prevent the resolution from reaching the House floor.

Sincerely,

Alexander M. Haig, Jr., George P. Shultz,
Lawrence S. Eagleburger, Madeleine K. Albright, Henry A. Kissinger, James A. Baker III, Warren Christopher, Colin L. Powell.

[From the Washington Post, Oct. 10, 2007]

WORSE THAN IRRELEVANT: A CONGRESSIONAL RESOLUTION ABOUT MASSACRES IN TURKEY 90 YEARS AGO ENDANGERS PRESENT-DAY U.S. SECURITY.

It's easy to dismiss a nonbinding congressional resolution accusing Turkey of "genocide" against Armenians during World War I as frivolous. Though the subject is a serious one—more than 1 million Armenians may have died at the hands of the Young Turk regime between 1915 and the early 1920s—House Democrats pushing for a declaration on the subject have petty and parochial interests. Rep. Adam B. Schiff (D-Calif.), the chief sponsor, says he has more than 70,000 ethnic Armenians in his Los Angeles district. Speaker Nancy Pelosi (D-Calif.), who has promised to bring the measure to a vote on the House floor, has important Armenian American campaign contributors. How many House members can be expected to carefully weigh Mr. Schiff's one-sided "findings" about long-ago events in Anatolia?

The problem is that any congressional action will be taken in deadly earnest by Turkey's powerful nationalist politicians and therefore by its government, which is already struggling to resist a tidal wave of anti-Americanism in the country. Turkey's prime minister, Recep Tayyip Erdogan, called President Bush on Friday to warn

against the resolution. Turkish politicians are predicting that responses to passage by the House could include denial of U.S. access to Turkey's Incirlik air base, a key staging point for military operations in Iraq and Afghanistan. The Turkish parliament could also throw off longstanding U.S. constraints and mandate an invasion of northern Iraq to attack Kurdish separatists there, something that could destabilize the only region of Iraq that is currently peaceful.

No wonder eight former secretaries of state, including Henry A. Kissinger, James A. Baker III, George P. Shultz and Madeleine K. Albright, have urged Ms. Pelosi to drop the resolution, saying it "could endanger our national security interests in the region, including our troops in Iraq and Afghanistan, and damage efforts to promote reconciliation between Armenia and Turkey." Yet the measure is proceeding: It is due to be voted on today by the House Foreign Affairs Committee.

Supporters say congressional action is justified by the refusal of the Turkish government to accept the truth of the crimes against Armenians, and its criminalization of statements describing those events as genocide. It's true that Turkey's military and political class has been inexcusably slow to come to terms with that history, and virulent nationalism—not Islamism—may be the country's most dangerous political force. But Turkish writers and intellectuals are pushing for a change in attitude, and formal and informal talks between Turks and Armenians are making slow progress. A resolution by Congress would probably torpedo rather than help such efforts. Given that reality, and the high risk to vital U.S. security interests, the Armenian genocide resolution cannot be called frivolous. In fact, its passage would be dangerous and grossly irresponsible.

LETTER BY SECRETARIES OF DEFENSE TO
SPEAKER PELOSI

SEPTEMBER 7, 2007.

Hon. NANCY PELOSI,
Speaker, House of Representatives, Washington, DC.

DEAR MADAM SPEAKER: We write today to convey our deep concern regarding the damage that passage of H. Res. 106 could do to relations between the United States and Turkey, a long-time NATO ally and a country which plays a critical role in supporting U.S. national security interests in the Balkans, greater Middle East, the Black Sea region and Afghanistan. The depth and breadth of our defense and security relationship with Turkey are considerable, and, as former Secretaries of Defense, we value Turkey's friendship and partnership.

Turkey makes numerous and substantial contributions to U.S. goals and interests abroad, including its close relationship with Israel, its deployment of military forces to the Balkans and its contribution to the NATO effort to defeat terrorism and support democracy in Afghanistan.

Just as public opinion plays a crucial role in our own country, the reaction of the Turkish public to the passage of H. Res. 106 would be considerable. Passage of H. Res. 106 would have a direct, detrimental effect on the operational capabilities, safety and well being of our armed forces in Iraq and in Afghanistan because the Turkish parliament would likely respond to the Turkish public's call for action by restricting or cutting off U.S. access to the Turkish air base at Incirlik and closing the crossing into Iraq at the Habur Gate. The Turkish parliament would also likely retract blanket flight clearances for U.S. military overflights, which are vital to transporting supplies and fuel to our troops. We also believe the increasingly open debate about this issue in

Turkey would surely be restricted by a negative public reaction to U.S. Congressional action. We are also concerned that any potential steps toward better relations between Turkey and Armenia will be set back by any action in the U.S. Congress.

In stating our opposition to H. Res. 106, we do not suggest that anything other than the most terrible of tragedies took place as the Ottoman Empire disintegrated in the early part of the last century. As President Bush and other Presidents before him have done, we recognize the need to acknowledge and learn from the tragedy. We respect that this issue is of great concern to you, and hope that you can consider other appropriate ways to highlight, commemorate and honor the memory of the victims without doing damage to our contemporary relations with modern Turkey.

Sincerely,

FRANK CARLUCCI
WILLIAM COHEN.
WILLIAM PERRY.

LEAVE OF ABSENCE

By unanimous consent, leave of absence was granted to:

Ms. CARSON (at the request of Mr. HOYER) for today and through October 31 on account of convalescence.

Mr. CUMMINGS (at the request of Mr. HOYER) for today.

Ms. EDDIE BERNICE JOHNSON of Texas (at the request of Mr. HOYER) for today and the balance of the week on account of a death in the family.

Mr. LYNCH (at the request of Mr. HOYER) for today.

Ms. WOOLSEY (at the request of Mr. HOYER) for today.

Mr. WILSON of Ohio (at the request of Mr. HOYER) for today on account of medical reasons.

Mr. WELLER of Illinois (at the request of Mr. BOEHNER) for today and October 16 on account of personal reasons.

SPECIAL ORDERS GRANTED

By unanimous consent, permission to address the House, following the legislative program and any special orders heretofore entered, was granted to:

(The following Members (at the request of Ms. WATERS) to revise and extend their remarks and include extraneous material:)

Ms. WATERS, for 5 minutes, today.

Ms. LEE, for 5 minutes, today.

Mr. MICHAUD, for 5 minutes, today.

Mr. HARE, for 5 minutes, today.

Mr. KAGEN, for 5 minutes, today.

Ms. WOOLSEY, for 5 minutes, today.

Mr. DEFAZIO, for 5 minutes, today.

Ms. SOLIS, for 5 minutes, today.

Ms. KAPTUR, for 5 minutes, today.

(The following Members (at the request of Mr. POE) to revise and extend their remarks and include extraneous material:)

Mr. POE, for 5 minutes, October 22.

Mr. BURTON of Indiana, for 5 minutes, today and October 16, 17, and 18.

Mr. BURGESS, for 5 minutes, today.

Mr. JONES of North Carolina, for 5 minutes, October 22.

ADJOURNMENT

Ms. FOXX. Mr. Speaker, I move that the House do now adjourn.

The motion was agreed to; accordingly (at 9 o'clock and 1 minutes p.m.), under its previous order, the House adjourned until tomorrow, Tuesday, October 16, 2007, at 9 a.m., for morning-hour debate.

EXECUTIVE COMMUNICATIONS, ETC.

Under clause 8 of rule XII, executive communications were taken from the Speaker's table and referred as follows:

3701. A letter from the Chairman, National Transportation Safety Board, transmitting a report of a violation of the Antideficiency Act by the National Transportation Safety Board, pursuant to 31 U.S.C. 1351; to the Committee on Appropriations.

3702. A letter from the Secretary of the Army, Department of Defense, transmitting a review of the Armed Reconnaissance Helicopter's (ARH) Program, pursuant to 10 U.S.C. 2433; to the Committee on Armed Services.

3703. A letter from the Director, Defense Research and Engineering, Department of Defense, transmitting the Department's report on the Joint IED Defeat Organization (JIEDDO) and the Office of the Director of Defense Research and Engineering (DDR&E) survey of international technology and research; to the Committee on Armed Services.

3704. A letter from the Secretary, Securities and Exchange Commission, transmitting the Commission's final rule — Exemptions for Banks Under Section 3(a)(5) of the Securities Exchange Act of 1934 and Related Rules [Release No. 34-56502; File No. S7-23-06] (RIN: 3235-AJ77) received September 27, 2007, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Financial Services.

3705. A letter from the Secretary, Securities and Exchange Commission, transmitting the Commission's final rule — DEFINITIONS OF TERMS AND EXEMPTIONS RELATING TO THE "BROKER" EXCEPTIONS FOR BANKS [Release No. 34-56501; File No. S7-22-06] (RIN: 3235-AJ74) received September 27, 2007, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Financial Services.

3706. A letter from the Secretary, Department of Health and Human Services, transmitting the Department's Report to Congress on the Child Care and Development Fund (CCDF) for FY 2004 and FY 2005, pursuant to Public Law 104-193, section 658L; to the Committee on Education and Labor.

3707. A letter from the Program Analyst, Department of Transportation, transmitting the Department's final rule — Federal Motor Vehicle Safety Standards; Occupant Crash Protection [Docket No. NHTSA-2007-28707] (RIN: 2127-AJ59) received September 18, 2007, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Energy and Commerce.

3708. A letter from the Principal Deputy Associate Administrator, Environmental Protection Agency, transmitting the Agency's final rule — Mercury Switches in Motor Vehicles; Significant New Use Rule [EPA-HQ-OPPT-2005-0036; FRL-8110-5] (RIN: 2070-AJ19) received October 2, 2007, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Energy and Commerce.

3709. A letter from the Principal Deputy Associate Administrator, Environmental Protection Agency, transmitting the Agency's final rule — Approval and Promulgation of Air Quality Implementation Plans; Pennsylvania; Carbon Monoxide Maintenance Plan Update; Limited Maintenance Plan in Philadelphia County [EPA-R03-OAR-2007-0511; FRL-8476-9] received October 2, 2007, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Energy and Commerce.

3710. A letter from the Principal Deputy Associate Administrator, Environmental Protection Agency, transmitting the Agency's final rule — Approval and Promulgation of Implementation Plans; Florida; Clean Air Interstate Rule [EPA-R04-OAR-2007-0360-200737; FRL-8478-1] received October 2, 2007, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Energy and Commerce.

3711. A letter from the Principal Deputy Associate Administrator, Environmental Protection Agency, transmitting the Agency's final rule — Approval and Promulgation of Implementation Plans; Georgia; Clean Air Interstate Rule [EPA-R04-OAR-2007-0251-200738; FRL-8478-6] received October 2, 2007, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Energy and Commerce.

3712. A letter from the Principal Deputy Associate Administrator, Environmental Protection Agency, transmitting the Agency's final rule — Approval and Promulgation of Air Quality Implementation Plans; Pennsylvania; Redesignation of the Erie 8-Hour Ozone Nonattainment Area to Attainment and Approval of the Area's Maintenance Plan and 2002 Base Year Inventory [EPA-R03-OAR-2007-0476; FRL-8478-9] received October 2, 2007, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Energy and Commerce.

3713. A letter from the Principal Deputy Associate Administrator, Environmental Protection Agency, transmitting the Agency's final rule — Approval of Implementation Plans of South Carolina; Clean Air Interstate Rule [EPA-R04-OAR-2007-0424-200746(a); [FRL-8478-3]] received October 2, 2007, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Energy and Commerce.

3714. A letter from the Principal Deputy Associate Administrator, Environmental Protection Agency, transmitting the Agency's final rule — Consumer and Commercial Products: Control Techniques Guidelines in Lieu of Regulations for Paper, Film, and Foil Coatings; Metal Furniture Coatings; and Large Appliance Coatings [EPA-HQ-OAR-2007-0454; FRL-8478-7] (RIN: 2060-A014) received October 2, 2007, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Energy and Commerce.

3715. A letter from the Principal Deputy Associate Administrator, Environmental Protection Agency, transmitting the Agency's final rule — National Primary Drinking Water Regulations for Lead and Copper: Short-Term Regulatory Revisions and Clarifications [EPA-HQ-OW-2005-0034; FRL-8476-5] (RIN: 2040-AE83) received October 2, 2007, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Energy and Commerce.

3716. A letter from the Assistant Secretary for Legislative Affairs, Department of State, transmitting a Memorandum of Justification under Section 451 of the Foreign Assistance Act for the Use of Funds for Counterdrug and Law Enforcement Programs in Central America, pursuant to 22 U.S.C. 2261; to the Committee on Foreign Affairs.

3717. A letter from the Deputy Director, Defense Security Cooperation Agency, transmitting pursuant to the reporting requirements of Section 36(b)(1) of the Arms Export Control Act, as amended, Transmittal No. 08-09, concerning the Department of the Army's proposed Letter(s) of Offer and Acceptance to Australia for defense articles and services; to the Committee on Foreign Affairs.

3718. A letter from the Deputy Director, Defense Security Cooperation Agency, transmitting a report pursuant to Section 36(b)(1) of the Arms Export Control Act; to the Committee on Foreign Affairs.

3719. A letter from the Assistant Secretary for Legislative Affairs, Department of State, transmitting pursuant to section 36(c) of the Arms Export Control Act, certification of a proposed license for the export of defense articles and services to the Governments of

Russia, Ukraine, and Norway (Transmittal No. DDTC 096-07); to the Committee on Foreign Affairs.

3720. A letter from the White House Liaison, Department of Justice, transmitting a report pursuant to the Federal Vacancies Reform Act of 1998; to the Committee on Oversight and Government Reform.

3721. A letter from the Assistant Secretary for Administration and Mgmt., Department of Labor, transmitting a report pursuant to the Federal Vacancies Reform Act of 1998; to the Committee on Oversight and Government Reform.

3722. A letter from the Deputy Assistant General Counsel, Department of Transportation, transmitting a report pursuant to the Federal Vacancies Reform Act of 1998; to the Committee on Oversight and Government Reform.

3723. A letter from the Director, Office of National Drug Control Policy, transmitting a report on the "Fiscal Year 2006 Accounting of Drug Control Funds," pursuant to Public Law 105-277, section 705(d)(Div. C-Title VII); to the Committee on Oversight and Government Reform.

3724. A letter from the President and Chief Executive Officer, Tennessee Valley Authority, transmitting the Authority's strategic plan covering fiscal years 2007 through 2012, pursuant to the Government Performance and Results Act; to the Committee on Oversight and Government Reform.

3725. A letter from the Director, Congressional Budget Office, transmitting the Office's report entitled, "Potential Cost Savings from the Pre-Disaster Mitigation Program," as required by the Predisaster Mitigation Program Reauthorization Act of 2005; to the Committee on Transportation and Infrastructure.

3726. A letter from the Regulations Coordinator, Department of Health and Human Services, transmitting the Department's final rule — Establishment of Revisit User Fee Program for Medicare Survey and Certification Activities [CMS-2268-F] (RIN: 0938-AO96) received September 19, 2007, pursuant to 5 U.S.C. 801(a)(1)(A); jointly to the Committees on Ways and Means and Energy and Commerce.

REPORTS OF COMMITTEES ON PUBLIC BILLS AND RESOLUTIONS

Under clause 2 of rule XIII, reports of committees were delivered to the Clerk for printing and reference to the proper calendar, as follows:

Mr. GEORGE MILLER, of California: Committee on Education and Labor. H.R. 1424. A bill to amend section 712 of the Employee Retirement Income Security Act of 1974, section 2705 of the Public Health Service Act, and section 9812 of the Internal Revenue Code of 1986 to require equity in the provision of mental health and substance-related disorder benefits under group health plans; with an amendment (Rept. 110-374, Pt. 1). Ordered to be printed.

Mr. RANGEL: Committee on Ways and Means. H.R. 1424. A bill to amend section 712 of the Employee Retirement Income Security Act of 1974, section 2705 of the Public Health Service Act, and section 9812 of the Internal Revenue Code of 1986 to require equity in the provision of mental health and substance-related disorder benefits under group health plans; with an amendment (Rept. 110-374, Pt. 2). Ordered to be printed.

Mr. DINGELL: Committee on Energy and Commerce. H.R. 20. A bill to provide for research on, and services for individuals with, postpartum depression and psychosis, with an amendment (Rept. 110-375). Referred to

the Committee of the Whole House on the State of the Union.

Mr. DINGELL: Committee on Energy and Commerce. H.R. 507. A bill to establish a grant program to provide vision care to children, and for other purposes; with an amendment (Rept. 110-376). Referred to the Committee of the Whole House on the State of the Union.

Mr. DINGELL: Committee on Energy and Commerce. H.R. 970. A bill to amend the Federal Food, Drug, and Cosmetic Act with respect to the distribution of the drug dextromethorphan, and for other purposes; with an amendment (Rept. 110-377). Referred to the Committee of the Whole House on the State of the Union.

Mr. DINGELL: Committee on Energy and Commerce. H.R. 1727. A bill to enhance and further research into paralysis and to improve rehabilitation and the quality of life for persons living with paralysis and other physical disabilities, and for other purposes; with an amendment (Rept. 110-378). Referred to the Committee of the Whole House on the State of the Union.

Mr. DINGELL: Committee on Energy and Commerce. H.R. 2295. A bill to amend the Public Health Service Act to provide for the establishment of an Amyotrophic Lateral Sclerosis Registry; with an amendment (Rept. 110-379). Referred to the Committee of the Whole House on the State of the Union.

Mr. FRANK of Massachusetts: Committee on Financial Services. H.R. 2868. A bill to eliminate the exemption from State regulation for certain securities designated by national securities exchanges (Rept. 110-380). Referred to the Committee of the Whole House on the State of the Union.

Mr. LANTOS: Committee on Foreign Affairs. H.R. 1567. A bill to amend the Foreign Assistance Act of 1961 to provide increased assistance for the prevention, treatment, and control of tuberculosis, and for other purposes; with an amendment (Rept. 110-381, Pt. 1). Ordered to be printed.

Mr. WELCH of Vermont: Committee on Rules. House Resolution 741. Resolution providing for consideration of the resolution (H. Res. 734) expressing the sense of the House of Representatives regarding the withholding of information relating to corruption in Iraq (Rept. 110-382). Referred to the House Calendar.

Ms. SLAUGHTER: Committee on Rules. House Resolution 742. Resolution providing for consideration of the bill (H.R. 2102) to maintain the free flow of information to the public by providing conditions for the federally compelled disclosure of information by certain persons connected with the news media (Rept. 110-383). Referred to the House Calendar.

DISCHARGE OF COMMITTEE

Pursuant to clause 2 of rule XII, the Committee on Energy and Commerce discharged from further consideration. H.R. 1567 referred to the Committee of the Whole House on the State of the Union, and ordered to be printed.

TIME LIMITATION OF REFERRED BILL

Pursuant to clause 2 of rule XII the following action was taken by the Speaker:

H.R. 2830. Referral to the Committees on Energy and Commerce and the Judiciary extended for a period ending not later than October 29, 2007.

PUBLIC BILLS AND RESOLUTIONS

Under clause 2 of rule XII, public bills and resolutions were introduced and severally referred, as follows:

By Ms. ROYBAL-ALLARD (for herself, Mr. SIMPSON, Mr. REYNOLDS, and Mr. WAXMAN):

H.R. 3825. A bill to amend the Public Health Service Act to establish grant programs to provide for education and outreach on newborn screening and coordinated followup care once newborn screening has been conducted, to reauthorize programs under part A of title XI of such Act, and for other purposes; to the Committee on Energy and Commerce.

By Mr. BOREN:

H.R. 3826. A bill to amend the State Department Basic Authorities Act of 1956 to increase the maximum amount of an award available under the Department of State rewards program for information leading to the capture of Osama bin Laden; to the Committee on Foreign Affairs.

By Mr. ALTMIRE:

H.R. 3827. A bill to amend the Internal Revenue Code of 1986 to provide tax relief to active duty military personnel and employers who assist them, and for other purposes; to the Committee on Ways and Means.

By Ms. CLARKE (for herself, Mr. ELLISON, Mr. TOWNS, Mr. HONDA, Mr. PASTOR, Mr. VAN HOLLEN, Mr. HINOJOSA, Mr. STARK, Mr. RANGEL, Mr. SHAYS, Mrs. MYRICK, Mr. PERLMUTTER, Mrs. MCCARTHY of New York, and Ms. NORTON):

H.R. 3828. A bill to reduce the backlog in processing requests made by U.S. Citizenship and Immigration Services to the National Name Check Program of the Federal Bureau of Investigation; to the Committee on the Judiciary.

By Mr. COHEN (for himself and Mr. WHITFIELD):

H.R. 3829. A bill to amend title 18, United States Code, to prohibit certain interstate conduct relating to exotic animals; to the Committee on the Judiciary.

By Mr. DEFAZIO (for himself, Mr. WALDEN of Oregon, Mrs. McMORRIS RODGERS, Mr. WU, and Mr. BLUMENAUER):

H.R. 3830. A bill to amend the Bonneville Power Administration portions of the Fisheries Restoration and Irrigation Mitigation Act of 2000 to authorize appropriations for fiscal years 2008 through 2014, and for other purposes; to the Committee on Natural Resources.

By Mr. ENGLISH of Pennsylvania (for himself, Mr. CAMP of Michigan, Mr. BRADY of Texas, Mr. NUNES, and Mr. TIBERI):

H.R. 3831. A bill to amend the Internal Revenue Code of 1986 to increase, and make permanent certain improvements to, the child tax credit; to the Committee on Ways and Means.

By Mr. GRIJALVA (for himself and Ms. LINDA T. SANCHEZ of California):

H.R. 3832. A bill to clarify and extend the commitment of the United States to pursue economic cooperation with Costa Rica and other nations in the Caribbean Basin, and for other purposes; to the Committee on Ways and Means.

By Mr. KING of New York:

H.R. 3833. A bill to eliminate the backlog in performing DNA analyses of DNA samples collected from convicted child sex offenders, and for other purposes; to the Committee on the Judiciary.

By Mr. LEWIS of Georgia:

H.R. 3834. A bill to amend title II of the Social Security Act to increase the level of earnings under which no individual who is blind is determined to have demonstrated an

ability to engage in substantial gainful activity for purposes of determining disability; to the Committee on Ways and Means.

By Mr. PAUL:

H.R. 3835. A bill to restore the Constitution's checks and balances and protections against government abuses as envisioned by the Founding Fathers; to the Committee on the Judiciary, and in addition to the Committees on Armed Services, Foreign Affairs, and Intelligence (Permanent Select), for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

By Ms. LINDA T. SANCHEZ of California (for herself, Ms. WATSON, Mr. GRIJALVA, Mr. BERMAN, Mr. SPACE, Ms. MATSUI, Mr. GONZALEZ, Ms. GIFFORDS, Mr. GEORGE MILLER of California, Mr. BILBRAY, Mr. HINCHEY, Mr. GENE GREEN of Texas, Mr. FILNER, Mr. REYES, and Mr. ISSA):

H.R. 3836. A bill to require that funds awarded to States and political subdivisions for the State Criminal Alien Assistance Program be distributed no later than 120 days after the last day of the annual application period for such Program; to the Committee on the Judiciary.

By Mr. ROYCE (for himself and Ms. WATSON):

H. Con. Res. 234. Concurrent resolution calling on the Government of the People's Republic of China to respect the human rights of refugees from North Korea; to the Committee on Foreign Affairs.

By Mr. ACKERMAN (for himself, Mr. LANTOS, Mr. ISSA, and Mr. BOUSTANY):

H. Res. 738. A resolution expressing the sense of the House of Representatives regarding the Government of Syria's continued interference in the internal affairs of Lebanon; to the Committee on Foreign Affairs, considered and agreed to.

By Mr. COOPER:

H. Res. 739. A resolution honoring Albert Arnold Gore, Jr., and the Intergovernmental Panel on Climate Change, Winners of the 2007 Nobel Peace Prize; to the Committee on Foreign Affairs.

By Ms. JACKSON-LEE of Texas (for herself, Mr. CHABOT, Mr. LANTOS, Ms. ROS-LEHTINEN, Ms. LEE, Mr. McCAUL of Texas, Mr. BISHOP of Georgia, Mrs. TAUSCHER, Mr. DOGGETT, Mr. FORTUÑO, Mr. McNULTY, Mrs. MALONEY of New York, Mr. DELAHUNT, Mr. WYNN, Mr. LEWIS of Georgia, Mrs. JONES of Ohio, Ms. CLARKE, and Mr. RUSH):

H. Res. 740. A resolution condemning in the strongest terms the attacks on African Union peacekeepers that occurred in Haskanita, Darfur, Sudan, on September 29, 2007; to the Committee on Foreign Affairs.

By Mr. ROTHMAN:

H. Res. 743. A resolution honoring Varian Fry on the 100th anniversary of his birth; to the Committee on Oversight and Government Reform.

By Mrs. WILSON of New Mexico (for herself and Ms. HERSETH SANDLIN):

H. Res. 744. A resolution recognizing the contributions of Native American veterans and calling upon the President to issue a proclamation urging the people of the United States to observe a day in honor of Native American veterans; to the Committee on Veterans' Affairs.

By Mr. WILSON of South Carolina (for himself and Mr. McDERMOTT):

H. Res. 745. A resolution recognizing the religious and historical significance of the festival of Diwali; to the Committee on Oversight and Government Reform.

ADDITIONAL SPONSORS

Under clause 7 of rule XII, sponsors were added to public bills and resolutions as follows:

H.R. 92: Mr. CARTER.
 H.R. 138: Mr. BURTON of Indiana.
 H.R. 321: Mr. GOODLATTE.
 H.R. 333: Mr. SIREs.
 H.R. 337: Mr. SKELTON.
 H.R. 369: Mr. ALLEN.
 H.R. 394: Mr. BROWN of South Carolina.
 H.R. 549: Mr. FATTAH.
 H.R. 618: Mr. GARRETT of New Jersey.
 H.R. 699: Mr. BROWN of Georgia and Mr. PICKERING.
 H.R. 719: Mr. COURTNEY and Mr. ROSS.
 H.R. 758: Mr. COSTELLO, Mr. FILNER, Mr. GOODE, Mrs. JONES of Ohio, and Mr. JONES of North Carolina.
 H.R. 760: Ms. SHEA-PORTER.
 H.R. 767: Mr. GOHMERT.
 H.R. 871: Mrs. MCCARTHY of New York.
 H.R. 897: Mr. ALLEN and Ms. WATERS.
 H.R. 1023: Mr. PETRI, Mr. DONNELLY, Mr. AL GREEN of Texas, Mr. WELCH of Vermont, Mr. FRANKS of Arizona, and Mr. BACHUS.
 H.R. 1026: Mr. NEUGEBAUER.
 H.R. 1043: Ms. CLARKE.
 H.R. 1063: Mr. PICKERING.
 H.R. 1071: Mr. SHAYS.
 H.R. 1072: Ms. BERKLEY and Ms. CARSON.
 H.R. 1073: Mr. FERGUSON and Mrs. GILLIBRAND.
 H.R. 1076: Mr. LOEBSACK, Ms. MOORE of Wisconsin, and Mr. GERLACH.
 H.R. 1077: Mrs. BIGBERT.
 H.R. 1088: Mr. DANIEL E. LUNGREN of California.
 H.R. 1102: Mrs. BOYDA of Kansas and Mr. ALTMIRE.
 H.R. 1108: Mr. LEVIN.
 H.R. 1110: Mr. BARTLETT of Maryland.
 H.R. 1125: Ms. GINNY BROWN-WAITE of Florida, Ms. LORETTA SANCHEZ of California, and Mr. SALI.
 H.R. 1127: Mr. ROGERS of Michigan and Mr. HOEKSTRA.
 H.R. 1135: Mrs. MCCARTHY of New York.
 H.R. 1147: Mr. RYAN of Wisconsin.
 H.R. 1148: Mr. MICHAUD.
 H.R. 1166: Mr. JACKSON of Illinois.
 H.R. 1192: Mr. SMITH of New Jersey.
 H.R. 1205: Ms. ROS-LEHTINEN.
 H.R. 1228: Mr. COSTA.
 H.R. 1248: Mr. MARKEY and Mr. FERGUSON.
 H.R. 1275: Mr. LARSEN of Washington and Mr. LANGEVIN.
 H.R. 1282: Mrs. NAPOLITANO.
 H.R. 1352: Ms. WASSERMAN SCHULTZ.
 H.R. 1357: Mr. FORBES.
 H.R. 1409: Mr. PICKERING.
 H.R. 1419: Mr. GRAVES, Mr. LYNCH, and Mr. SALI.
 H.R. 1424: Mr. SHULER.
 H.R. 1474: Ms. SLAUGHTER, Mr. ENGLISH of Pennsylvania, Mr. MANZULLO, Mr. SOUDER, Mr. ROHRABACHER, and Mr. BLUNT.
 H.R. 1481: Mr. BARRETT of South Carolina.
 H.R. 1497: Mr. KILDEE.
 H.R. 1528: Mr. MARKEY.
 H.R. 1552: Mr. SHUSTER, Ms. WOOLSEY, and Mr. MEEK of Florida.
 H.R. 1566: Mr. CUMMINGS.
 H.R. 1584: Ms. SUTTON and Mr. HIGGINS.
 H.R. 1610: Mr. POE and Mr. UDALL of Colorado.
 H.R. 1619: Mr. RAHALL.
 H.R. 1621: Mr. NADLER.
 H.R. 1687: Mr. MANZULLO.
 H.R. 1738: Mr. UDALL of Colorado, Mr. MARKEY, Mr. ENGLISH of Pennsylvania, Mr. HASTINGS of Florida, Mr. CLAY, Ms. HERSETH SANDLIN, Mr. CAPUANO, Mr. LOBIONDO, and Mr. BOSWELL.
 H.R. 1746: Mr. BILIRAKIS, Mr. GALLEGLY, Mr. MAHONEY of Florida, Mr. WILSON of South Carolina, and Mr. LINCOLN DIAZ-BALART of Florida.

H.R. 1755: Mrs. CAPPS.
 H.R. 1767: Mr. SPACE.
 H.R. 1818: Mrs. TAUSCHER and Mr. PETERSON of Minnesota.
 H.R. 1823: Ms. BALDWIN.
 H.R. 1843: Mr. PICKERING and Mr. BOYD of Florida.
 H.R. 1869: Mr. CRAMER.
 H.R. 1927: Mrs. MALONEY of New York.
 H.R. 1953: Mr. GENE GREEN of Texas.
 H.R. 1959: Mr. GALLEGLY.
 H.R. 1964: Ms. SCHWARTZ.
 H.R. 1983: Mr. PATRICK MURPHY of Pennsylvania.
 H.R. 1992: Ms. CORRINE BROWN of Florida, Mr. FILNER, and Mrs. GILLIBRAND.
 H.R. 2033: Mr. COBLE.
 H.R. 2067: Mr. FERGUSON.
 H.R. 2108: Mr. MICHAUD.
 H.R. 2116: Mr. CAPUANO and Mr. MILLER of North Carolina.
 H.R. 2169: Mr. LIPINSKI.
 H.R. 2236: Mr. HONDA and Mr. KUCINICH.
 H.R. 2265: Ms. WATERS.
 H.R. 2266: Ms. LEE.
 H.R. 2280: Mr. MORAN of Kansas.
 H.R. 2295: Mr. LARSON of Connecticut.
 H.R. 2315: Mr. HULSHOF.
 H.R. 2331: Mr. LINCOLN DAVIS of Tennessee.
 H.R. 2332: Mrs. SCHMIDT, Mr. BRADY of Pennsylvania, Mr. FRELINGHUYSEN, Mr. HOLDEN, Mr. MILLER of Florida, Mr. SMITH of New Jersey, Mr. FORBES, and Mr. CARTER.
 H.R. 2380: Mr. COSTELLO, Mr. LAHOOD, Mr. GOODLATTE, and Mr. BACHUS.
 H.R. 2391: Mr. CRAMER.
 H.R. 2416: Mr. NEUGEBAUER.
 H.R. 2417: Ms. HIRANO and Mrs. EMERSON.
 H.R. 2452: Ms. DELAURO, Mr. WYNN, and Ms. MCCOLLUM of Minnesota.
 H.R. 2464: Mr. EHLERS and Mr. HOLDEN.
 H.R. 2505: Mr. KAGEN.
 H.R. 2514: Mr. COSTELLO, Mrs. MALONEY of New York, Mr. ORTIZ, Mrs. DAVIS of California, Mrs. CAPPS, Mr. HOLT, Mr. WYNN, Mr. TOWNS, Mr. MEEK of Florida, Mr. ETHERIDGE, Ms. DELAURO, Mr. BISHOP of Georgia, Mr. PAYNE, and Mr. CUMMINGS.
 H.R. 2574: Mr. WYNN.
 H.R. 2578: Mr. SNYDER.
 H.R. 2596: Ms. WASSERMAN SCHULTZ.
 H.R. 2610: Mr. PORTER.
 H.R. 2620: Mr. HONDA.
 H.R. 2634: Mr. CARNAHAN.
 H.R. 2639: Mr. BACHUS.
 H.R. 2651: Mr. HINCHEY and Ms. WOOLSEY.
 H.R. 2668: Mr. JACKSON of Illinois, Mr. FATTAH, and Mr. VAN HOLLEN.
 H.R. 2677: Mr. MILLER of North Carolina.
 H.R. 2686: Mr. COOPER.
 H.R. 2702: Mr. McNERNEY.
 H.R. 2772: Mr. NEUGEBAUER.
 H.R. 2894: Mr. SOUDER.
 H.R. 2910: Ms. WATERS.
 H.R. 2915: Mr. WAXMAN and Mr. LATOURETTE.
 H.R. 2927: Mr. JINDAL and Mr. PORTER.
 H.R. 2933: Ms. LINDA T. SANCHEZ of California, Mr. CUMMINGS, Ms. FOXX, and Ms. WATSON.
 H.R. 3028: Mr. MANZULLO, Mr. DANIEL E. LUNGREN of California, Mr. RANGEL, and Mr. JEFFERSON.
 H.R. 3029: Ms. MCCOLLUM of Minnesota.
 H.R. 3033: Mr. MILLER of North Carolina.
 H.R. 3040: Ms. HIRONO.
 H.R. 3090: Mr. JINDAL, Mr. PRICE of North Carolina, and Mr. WALDEN of Oregon.
 H.R. 3109: Mr. BILIRAKIS and Mr. McHUGH.
 H.R. 3119: Mr. STARK, Ms. WATERS, and Ms. HIRONO.
 H.R. 3156: Mrs. MUSGRAVE.
 H.R. 3167: Mr. CUMMINGS and Ms. HIRONO.
 H.R. 3175: Mr. MOORE of Kansas.
 H.R. 3191: Ms. WOOLSEY, Mr. YOUNG of Alaska, Mr. KENNEDY, Mr. VAN HOLLEN, and Mr. PAYNE.
 H.R. 3202: Mr. KIRK.

H.R. 3203: Mr. KIRK.
 H.R. 3219: Mr. FRELINGHUYSEN, Mr. PRICE of North Carolina, Mr. BROWN of South Carolina, Ms. CLARKE, Mr. MCCOTTER, Mr. HALL of New York, Mr. OLVER, and Mr. FORTUÑO.
 H.R. 3256: Ms. BORDALLO.
 H.R. 3281: Ms. ZOE LOFGREN of California.
 H.R. 3282: Mr. LEVIN, Mr. WALBERG, Mr. LOBIONDO, and Mr. MILLER of North Carolina.
 H.R. 3298: Ms. HIRONO.
 H.R. 3317: Ms. BORDALLO and Mrs. EMERSON.
 H.R. 3327: Mr. FRANK of Massachusetts, Mr. MCCOTTER, Mr. HALL of New York, Ms. HIRONO, and Mr. FORTUÑO.
 H.R. 3334: Mr. MCHUGH.
 H.R. 3368: Mr. SMITH of New Jersey, Mr. PAYNE, and Mr. HINCHY.
 H.R. 3369: Mrs. MYRICK.
 H.R. 3378: Mr. MILLER of North Carolina, Mr. FILNER, Mr. VAN HOLLEN, Mr. MCNERNEY, Mr. HASTINGS of Florida, and Mr. CLAY.
 H.R. 3380: Mr. LOBIONDO and Mr. BAIRD.
 H.R. 3381: Mr. BRADY of Pennsylvania.
 H.R. 3389: Mrs. MCCARTHY of New York.
 H.R. 3397: Ms. CARSON and Mr. COHEN.
 H.R. 3438: Ms. SUTTON.
 H.R. 3453: Mr. CONAWAY and Mr. CAMP of Michigan.
 H.R. 3498: Mrs. JONES of Ohio.
 H.R. 3512: Mr. JEFFERSON.
 H.R. 3533: Mr. VELÁZQUEZ, Mr. BISHOP of Utah, Mr. WAMP, Mr. WEXLER, Mr. UDALL of Colorado, Mr. RODRIGUEZ, Mr. ROGERS of Alabama, and Mr. BACA.
 H.R. 3544: Mr. CLAY, Mr. ETHERIDGE, Mr. ALLEN, and Ms. SUTTON.
 H.R. 3548: Mr. HARE and Mr. GORDON.
 H.R. 3558: Mr. HOLDEN.
 H.R. 3577: Ms. KILPATRICK and Mr. SIRES.
 H.R. 3584: Mr. SAXTON.
 H.R. 3585: Mr. PETERSON of Minnesota, Mr. INSLEE, Ms. SUTTON, and Mr. FARR.
 H.R. 3609: Mr. VAN HOLLEN, Mr. STARK, Mrs. JONES of Ohio, Ms. WASSERMAN SCHULTZ, and Mr. HASTINGS of Florida.
 H.R. 3622: Mr. MORAN of Kansas, Mr. MANZULLO, Mr. WALSH of New York, Mr. GRAVES, Mr. PAUL, Mr. TOM DAVIS of Virginia, and Mr. LEWIS of Georgia.
 H.R. 3629: Mr. PAUL and Mr. GORDON.
 H.R. 3660: Mr. BACHUS and Mr. SOUDER.
 H.R. 3663: Mr. HOLT, Ms. SHEA-PORTER, Mr. HONDA, and Mr. HARE.
 H.R. 3665: Mr. BRADY of Pennsylvania.
 H.R. 3666: Ms. CLARKE, Mr. BUTTERFIELD, Mr. MARSHALL, and Mr. VAN HOLLEN.
 H.R. 3674: Ms. HIRONO.
 H.R. 3687: Mr. PASTOR, Mr. TOWNS, and Mr. GENE GREEN of Texas.
 H.R. 3689: Ms. DEGETTE.
 H.R. 3691: Mr. TIERNEY and Mr. DEFAZIO.
 H.R. 3692: Mr. CROWLEY, Mr. RUSH, Mr. HINCHY, Mr. FATTAH, Ms. SOLIS, Mr. FURTUÑO, Mr. TOWNS, Mr. KLEIN of Florida, and Ms. WASSERMAN SCHULTZ.
 H.R. 3697: Mr. BAIRD.
 H.R. 3700: Mr. WEXLER and Mr. RANGEL.
 H.R. 3705: Ms. CLARKE, Mr. BUTTERFIELD, and Ms. BORDALLO.
 H.R. 3723: Mr. KING of New York.
 H.R. 3738: Mr. BROWN of South Carolina, Mr. KING of Iowa, and Mr. PEARCE.
 H.R. 3757: Mr. LIPINSKI, Ms. SHEA-PORTER, and Mr. SHAYS.

H.R. 3779: Mr. ROYCE, Mr. MCCAUL of Texas, Mr. NEUGEBAUER, Mr. ALEXANDER, and Mr. WALBERG.
 H.R. 3781: Mr. LIPINSKI.
 H.R. 3793: Ms. CORRINE BROWN of Florida, Mr. HARE, Mr. BRALEY of Iowa, Mr. TOWNS, Mr. BERRY, Mr. HOLDEN, Ms. BERKLEY, Mr. DOYLE, and Mr. PAYNE.
 H.R. 3797: Mr. ETHERIDGE, Ms. HOOLEY, Mr. LIPINSKI, Mr. ABERCROMBIE, Ms. SCHAKOWSKY, and Ms. HIRONO.
 H.R. 3799: Ms. WOOLSEY.
 H.R. 3807: Ms. KAPTUR, Mr. MORAN of Virginia, and Ms. HIRONO.
 H.R. 3808: Ms. CLARKE.
 H. Con. Res. 154: Mr. PENCE, Mr. MANZULLO, Mr. KIRK, Mr. LAMBORN, Mr. INGLIS of South Carolina, Mr. HOEKSTRA, Mr. RENZI, Mr. SMITH of New Jersey, and Mr. MCCOTTER.
 H. Con. Res. 163: Mr. MCHUGH.
 H. Con. Res. 182: Mr. MCHUGH, Mr. DELAHUNT, Mr. MANZULLO, Mr. UDALL of New Mexico, Mr. WALDEN of Oregon, Mr. OBERSTAR, Mr. BRADY of Texas, Mr. HASTERT, Mr. LINDER, Mr. BARROW, Mr. LINCOLN DAVIS of Tennessee, Mr. RAMSTAD, Mr. CARNEY, Mr. MCNERNEY, Mr. SMITH of Washington, Mr. LARSEN of Washington, Mr. LEWIS of Georgia, Mrs. CAPPS, Mr. CANNON, and Mr. UDALL of Colorado.
 H. Con. Res. 197: Mr. FARR.
 H. Con. Res. 221: Mr. COHEN.
 H. Con. Res. 228: Mr. MCCAUL of Texas.
 H. Con. Res. 230: Mr. REYES, Mr. TOWNS, Mr. PUTNAM, Ms. MOORE of Wisconsin, Mr. LEVIN, Mr. FORBES, and Mr. KING of New York.
 H. Res. 111: Mr. FRELINGHUYSEN, Mr. KINGSTON, Ms. HIRONO, and Mr. BROWN of South Carolina.
 H. Res. 169: Mr. LATOURETTE and Mr. MANZULLO.
 H. Res. 185: Mr. BRADY of Pennsylvania.
 H. Res. 194: Ms. RICHARDSON.
 H. Res. 237: Mr. BOSWELL and Mr. MORAN of Virginia.
 H. Res. 245: Mr. ENGEL, Ms. BERKLEY, Mr. LAMPSON, Mr. CARDOZA, Ms. WASSERMAN SCHULTZ, and Mr. FILNER.
 H. Res. 356: Mr. LIPINSKI.
 H. Res. 415: Mr. BRADY of Pennsylvania, Mr. SMITH of Washington, and Mr. BACA.
 H. Res. 448: Mr. DINGELL and Mrs. DAVIS of California.
 H. Res. 499: Mr. LINCOLN DAVIS of Tennessee.
 H. Res. 542: Mr. BRADY of Pennsylvania and Mrs. GILLIBRAND.
 H. Res. 616: Ms. HARMAN.
 H. Res. 618: Mr. CARNAHAN and Mr. KUCINICH.
 H. Res. 666: Mr. AL GREEN of Texas, Mr. GENE GREEN of Texas, and Mr. HINOJOSA.
 H. Res. 684: Mr. ALTMIRE, Ms. HIRONO, and Mr. WELCH of Vermont.
 H. Res. 700: Ms. BORDALLO.
 H. Res. 707: Ms. CLARKE, Mr. JOHNSON of Georgia, Ms. CARSON, and Mr. CONYERS.
 H. Res. 708: Mr. COHEN, Mr. TANNER, Ms. WATSON, Mr. MILLER of North Carolina, Mr. COSTA, Mr. ACKERMAN, Mr. CARNAHAN, Mr. SHERMAN, Mr. PAYNE, Mr. DELAHUNT, Mr. JONES of North Carolina, and Mr. BERMAN.
 H. Res. 713: Ms. SCHWARTZ and Mr. WEXLER.
 H. Res. 721: Ms. LORETTA SANCHEZ of California.

H. Res. 725: Mr. PAYNE, Mr. KIND, Mr. LEVIN, Mr. HINCHY, Mr. VAN HOLLEN, Mr. THOMPSON of California, Mr. MCDERMOTT, Mr. WU, Mr. ALLEN, Mr. EMANUEL, Mr. WYNN, Ms. JACKSON-LEE of Texas, Mr. MORAN of Virginia, Mr. ELLISON, Ms. LORETTA SANCHEZ of California, Ms. MCCOLLUM of Minnesota, Ms. MOORE of Wisconsin, Ms. SOLIS, Mr. FILNER, Mr. KILDEE, Mr. DOYLE, and Mr. FARR.
 H. Res. 726: Ms. HOOLEY, Mr. MEEK of Florida, Mr. GRIJALVA, Mr. BRADY of Pennsylvania, Mr. DOYLE, Mr. ROTHMAN, Ms. BERKLEY, Mr. HIGGINS, Ms. CLARKE, Mr. BARROW, Mr. COSTA, Mr. HINCHY, Mr. CAPUANO, Mr. SHERMAN, Mrs. TAUSCHER, Mr. MORAN of Kansas, Mr. MORAN of Virginia, Mr. WOLF, Ms. CASTOR, Ms. MATSUI, Mr. HINOJOSA, Mr. KIRK, Mr. CUMMINGS, Mr. SCOTT of Georgia, Mr. GUTIERREZ, Mr. FARR, Mr. MURPHY of Connecticut, Mr. LARSON of Connecticut, Mr. COURTNEY, Mrs. DAVIS of California, and Ms. ESHOO.
 H. Res. 730: Mr. BILIRAKIS, and Mr. LINCOLN DIAZ-BALART of Florida.
 H. Res. 734: Mr. HIGGINS and Mr. CUMMINGS.
 H. Res. 735: Ms. ZOE LOFGREN of California, Ms. WATSON, Mr. MICHAUD, Mr. SERRANO, Ms. EDDIE BERNICE JOHNSON of Texas, Mr. BLUMENAUER, Mr. ALLEN, Mrs. DAVIS of California, Mr. GEORGE MILLER of California, Mr. SHAYS, Mr. ELLISON, and Mr. COOPER.

CONGRESSIONAL EARMARKS, LIMITED TAX BENEFITS, OR LIMITED TARIFF BENEFITS

Under clause 9 of rule XXI, lists or statements on congressional earmarks, limited tax benefits, or limited tariff benefits were submitted as follows:

OFFERED BY RICK BOUCHER

The amendment to be offered by Representative Boucher or a designee to H.R. 2102, the Free Flow of Information Act of 2007, does not contain any congressional earmarks, limited tax benefits, or limited tariff benefits, as defined in clause 9(d), 9(e), or 9(f) of rule XXI.

OFFERED BY JOHN CONYERS, JR.

The amendment to be offered by Representative Conyers or a designee to H.R. 3773, the "Responsible Electronic Surveillance That is Overseen, Reviewed, and Effective Act of 2007" (RESTORE Act of 2007), does not contain any congressional earmarks, limited tax benefits, or limited tariff benefits as defined in clause 9(d), 9(e), or 9(f) of rule XXI.

DELETIONS OF SPONSORS FROM PUBLIC BILLS AND RESOLUTIONS

Under clause 7 of rule XII, sponsors were deleted from public bills and resolutions as follows:

H. Res. 106: Mr. BOYD of Florida, Mr. HERGER, Mr. BERRY, Ms. KILPATRICK, Mr. BISHOP of Georgia, Mr. LINCOLN DAVIS of Tennessee, and Mr. ROSS.

H. Res. 610: Ms. KILPATRICK.