

the hospital, the infant regained consciousness and began to breathe on its own. The infant was released from the hospital the following day.

When asked about how this call had affected his mindset for the rest of his shift, Deputy Harper was, as he always is, humble and expressed how glad and thankful he was that the young child would be all right.

Deputy Wes Harper's quick thinking and selfless action speak volumes of the training of Clark County's first responders, as well as their devotion to Hoosiers all the way across Clark County. His actions are a prime example of the high standards and traditions of law enforcement officers everywhere across this country.

Mr. Speaker, on behalf of Indiana's Ninth District, I would like to express our gratitude to Clark County Sheriff's Deputy Wes Harper for his lifesaving actions.

RECOGNIZING NATIONAL COLORECTAL CANCER AWARENESS MONTH

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

Mr. PAYNE. Mr. Speaker, I rise today to recognize March 2017 as National Colorectal Cancer Awareness Month.

This month offers us an opportunity to raise awareness about colorectal cancer and to recommit to taking action against this disease. Colorectal cancer is one of the most preventable forms of cancer, yet it remains the second leading cause of cancer death among men and women, combined, in the United States.

This year, more than 130,000 individuals in the United States will be diagnosed with colorectal cancer. Approximately 50,000 more will die from it. Too often, individuals are forced to forego screening because of high insurance costs. In order to get more people screened and save lives, we need to break down the financial barriers to treatment.

Last month, I joined the Congressman CHARLIE DENT and LEONARD LANCE to introduce the Removing Barriers to Colorectal Cancer Screening Act. Our bill eliminates colonoscopy cost-sharing for Medicare patients so that every patient has access to this lifesaving treatment.

Mr. Speaker, we cannot let cost stand in the way of care. I urge Congress to quickly advance this legislation. Patients are counting on it.

□ 1215

EMPLOYEES UNDER INVESTIGATION

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

Mr. GOHMERT. Mr. Speaker, something that has not gotten nearly

enough attention in the media concerns security. We know that there were people working—Imran Awan, Abid Awan, Jamal Awan, Hina Alvi, Natalia Sova—and I have heard that one of these has fled back to Pakistan since being investigated.

They worked on Democratic computer systems. And although we have been told, "Well, they couldn't get into the SCIF and get into the classified section," they had access to congressional computers. I am told that if you can get access to one Congress Member's Outlook program, you can easily hack into many others.

This has got to be investigated. It appears to be a major crime and a major breach of trust in the House.

I hope my friends across the aisle that use these people will step forward and help us plug the hole.

SMASH VECTOR-BORNE DISEASES

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

Mr. SOTO. Mr. Speaker, I rise today to ask my colleagues to help smash Zika and other vector-borne diseases.

It is my privilege to reintroduce the bipartisan Strengthening Mosquito Abatement for Safety and Health Act, or SMASH Act. H.R. 1310 has over 14 cosponsors already, both Democrats and Republicans, coming together to tackle this great challenge.

As we saw last year, in Florida, Puerto Rico, across Latin America, and beyond, mosquito-borne diseases are constantly evolving and can quickly have new and devastating consequences. We thought we knew Zika, but then it changed. So we have to stay a step ahead.

That is what the SMASH Act does. It keeps us ahead of perennial threats like Zika, West Nile, and other diseases by expanding programs for mosquito-borne and vector-borne disease surveillance and control.

Investing and fighting all these diseases together will protect the health of countless Americans and save us money down the road.

The scientists and public health experts at the Centers for Disease Control in my home State know the tools they need. Colleagues, let's get together and give it to them.

REFUGEES WANT TO LIVE IN PEACE

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

Mr. VEASEY. Mr. Speaker, it has been a little more than a day since our President addressed this body for the first time. Many of us hoped that President Trump would finally lay out a positive vision for America. Instead, the address flamed the fears about immigrants and refugees.

I invited Syrian refugee Bothina Matar as my guest to the joint session

to show our President that, despite false claims, refugees approved through our vigorous vetting program simply want to live in peace.

After speaking with Bothina about her family's experience in Syria and at a Jordanian refugee camp, it is clear that our refugee program is successfully completing its mission.

After Bothina and her family were first referred as potential candidates for resettlement, they endured a rigorous 18-month-long vetting process. Only then was the family offered the opportunity to seek refuge in Dallas and put on the path to self-sufficiency.

Our country is welcoming, and it is a place that, despite what the President and House Republicans claim, we can both protect the American people and extend our hand to the most vulnerable amongst us.

COMMUNICATION FROM CHAIR OF COMMITTEE ON TRANSPORTATION AND INFRASTRUCTURE

The SPEAKER pro tempore laid before the House the following communication from the Chair of the Committee on Transportation and Infrastructure; which was read and, without objection, referred to the Committee on Appropriations:

COMMITTEE ON TRANSPORTATION AND INFRASTRUCTURE, HOUSE OF REPRESENTATIVES,

Washington, DC, March 1, 2017.

Hon. PAUL RYAN,
Speaker of the House, House of Representatives,
Washington, DC.

DEAR MR. SPEAKER: On February 28, 2017, pursuant to section 3307 of Title 40, United States Code, the Committee on Transportation and Infrastructure met in open session to consider eight resolutions provided by the General Services Administration at the request of the Department of Veterans Affairs (VA). The Committee has authorized these leases to be executed pursuant to GSA's leasing authority in accordance with the provisions of the Public Buildings Act.

The Committee continues to work to reduce the cost of federal property and leases. The eight resolutions considered are part of the VA's Construction, Long Range Capital Plan and include consolidations and relocation of existing space to improve the VA's delivery of healthcare.

I have enclosed copies of the resolutions adopted by the Committee on Transportation and Infrastructure on February 28, 2017.

Sincerely,

BILL SHUSTER,
Chairman.

Enclosures.

COMMITTEE RESOLUTION

LEASE—U.S. DEPARTMENT OF VETERANS AFFAIRS, NEW PORT RICHEY, FLORIDA

Resolved by the Committee on Transportation and Infrastructure of the U.S. House of Representatives, that pursuant to 40 U.S.C. §3307, a lease of up to 114,000 net usable square feet of space, and 770 parking spaces, for the Department of Veterans Affairs for a Community Based Outpatient Clinic in New Port Richey, Florida to replace and consolidate five existing leases at a proposed unserviced annual cost of \$3,876,000 for a lease term of up to 20 years, a prospectus for which is attached to and included in this resolution.