United States
of America

Congressional Record

PROCEEDINGS AND DEBATES OF THE 119th CONGRESS, FIRST SESSION

Vol. 171 WASHINGTON, THURSDAY, OCTOBER 2, 2025 *No. 162*

House of Representatives

The House was not in session today. Its next meeting will be held on Friday, October 3, 2025, at 3:30 p.m.

Senate

THURSDAY, OCTOBER 2, 2025

The Senate met at 12 noon and was called to order by the Honorable PETE RICKETTS, a Senator from the State of Nebraska.

PRAYER

The Chaplain, Dr. Barry C. Black, offered the following prayer:

Let us pray.

Spirit of the living God, fall afresh on us. Inspire our lawmakers to be instruments of Your purposes. As the shutdown continues, may they humbly seek to do what is best for our Nation and world, achieving together what cannot be done without allies.

Lord, give them the wisdom to see that there is a practical morality based on absolutes that they should follow. Remind them that they are accountable to You for their thoughts, words, and deeds. May they speak truth as You give them the ability to comprehend it, finding workable solutions to challenging problems.

We pray in Your magnificent Name. Amen.

PLEDGE OF ALLEGIANCE

The Presiding Officer led the Pledge of Allegiance, as follows:

I pledge allegiance to the Flag of the United States of America, and to the Republic for which it stands, one nation under God, indivisible, with liberty and justice for all.

APPOINTMENT OF ACTING PRESIDENT PRO TEMPORE

The PRESIDING OFFICER. The clerk will please read a communication to the Senate from the President pro tempore (Mr. GRASSLEY).

The senior assistant legislative clerk read the following letter:

U.S. SENATE,
PRESIDENT PRO TEMPORE,
Washington, DC, October 2, 2025.

To the Senate:

Under the provisions of rule I, paragraph 3, of the Standing Rules of the Senate, I hereby appoint the Honorable PETE RICKETTS, a Senator from the State of Nebraska, to perform the duties of the Chair.

CHUCK GRASSLEY,
President pro tempore.

Mr. RICKETTS thereupon assumed the Chair as Acting President pro tempore.

RESERVATION OF LEADER TIME

The ACTING PRESIDENT pro tempore. Under the previous order, the leadership time is reserved.

CONCLUSION OF MORNING BUSINESS

The ACTING PRESIDENT pro tempore. Morning business is closed.

EXECUTIVE CALENDAR

EN BLOC NOMINATIONS

The ACTING PRESIDENT pro tempore. Under the previous order, the Senate will proceed to executive session and resume consideration of S. Res. 412, which the clerk will report.

The senior assistant legislative clerk read as follows:

An executive resolution (S. Res. 412) authorizing the en bloc consideration in Executive Session of certain nominations on the Executive Calendar.

RECOGNITION OF THE MAJORITY LEADER

The ACTING PRESIDENT pro tempore. The majority leader is recognized.

GOVERNMENT FUNDING

Mr. THUNE. Mr. President, we are into the second day of a government shutdown after Democrats, once again, rejected a clean, nonpartisan funding bill to keep the government open while we continue bipartisan appropriations work. We are not going to be voting today, as we have Jewish colleagues who are currently observing Yom Kippur, but we will be voting tomorrow. And we are going to give my Democratic colleagues another opportunity to reopen the government by passing the clean, nonpartisan funding extension before us.

I realize that my Democrat colleagues are facing pressure from Members of their far-left base, but they are playing a losing game here. A robust majority of American voters are against a government shutdown. Even some Democrat Members are raising concerns, with a Democrat House Member noting yesterday:

This government shutdown is the result of hardball politics driven by the demands far-left groups are making for Democratic Party leaders to put on a show of their opposition to President Trump. The shutdown is hurting Americans and our economy . . . normal

● This "bullet" symbol identifies statements or insertions which are not spoken by a Member of the Senate on the floor.

policy disagreements are no reason to subject our constituents to the continued harm of this shutdown.

That, from a Democrat House Member.

Organizations ranging from the National Fraternal Order of Police to the U.S. Chamber of Commerce to the Teamsters have spoken out against shutting down the government. The Teamsters president said Tuesday:

A shutdown will hurt working people. Period. Senators should . . . pass the House-passed clean, short-term funding bill.

Senators should . . . pass the House-passed clean, short-term funding bill.

That, again, from the president of the Teamsters. ''Clean'' is what he said.

My Democrat colleagues have little to work with in this debate, with their own previous statements working against them, and so they have tried to portray the clean, nonpartisan funding bill before us as something other than what it is.

But the Teamsters president reminds us of the facts. We are not asking Democrats to swallow a list of new Republican policies or partisan demands—not in there. We are asking Democrats to do nothing more than pass a clean, nonpartisan bill to fund the government for a few more weeks so that we can get back to bipartisan appropriations work.

And I said ''bipartisan appropriations work''—the kind of bipartisan work that has seen the Senate pass three appropriations bills so far by robust bipartisan margins, the kind of work that we want to continue once Democrats have stopped holding government funding hostage to a long list of partisan demands.

So far, three of our Democrat colleagues have joined Republicans to attempt to reopen the government. If we can just find a few more Democrats to join us, we can end this shutdown and get back to bipartisan appropriations work and the business of the American people.

Democrats voted for clean CRs like the one before us 13 times—13 times—during the Biden administration. I hope they will join us to pass this clean CR and reopen the government for hard-working Americans.

I yield the floor.

The ACTING PRESIDENT pro tempore. The Senator from Kansas.

Mr. MARSHALL. Mr. President, here we are, day No. 2 of the Schumer shutdown, or should we call this the AOC shutdown? After all, when the puppet master gets outmaneuvered by his own radical Squad, who is really calling the shots? Shouldn't we give the Squad some credit here for this shutdown?

Now, let me say that a different way. This Democrat shutdown is nothing but a cynical political shutdown, with Senator SCHUMER kowtowing to his radical, leftwing extremists. He is desperately recoiling, fighting to stave off a primary and to save his party from the piranhas in their own midst. Look, I am sure he feels like he has been steamrolled by President Trump and the overwhelming ''America First'' mandate that 78 million American patriots who voted for real change.

Everything else—all other excuses—is just a pathetic smokescreen to hide their failures. But let's take a closer look at some of these Democrat excuses. Again, they are decoys; they are camouflage and why this is indeed a Schumer shutdown.

First of all, there is no substance to their arguments. They want to talk about healthcare. Boy, do Republicans want to fix healthcare, but the real problem is the cost of healthcare. Healthcare has gone up 400 percent in the last couple of decades. It is the cost of healthcare. All my Democratic friends want to do is just keep throwing more and more money, more and more subsidies, making big healthcare systems rich.

Premiums are going to go up 20 percent this year—20 percent. Again, healthcare is what is leading inflation. If it wasn't for healthcare inflation, we would probably be down closer to 2 percent. So regardless of what happens here in Congress in the next 3 to 4 months, your healthcare premium is going to go up 20 percent on average.

This shutdown is keeping us from working on the real problem, and that is the cost of healthcare. Think about Republican solutions that we have out there right now.

We have legislation that we call the Price Tags bill that we hope to debate, work up, and mark up in our healthcare committee this fall. What that bill does is it forces every hospital, surgery center, imaging center to put a pricetag on the procedures you are going to have done.

Can you imagine walking into a restaurant and not knowing the price of a good Kansas steak versus some cheap-grade steak from another country? You couldn't imagine that. So when you are sitting there, deciding whether to have your hip replaced at a hospital like in my hometown of Great Bend, America, versus having it done at another facility, you will see that you can have the same procedure done for maybe a fifth of what it costs at other facilities. By the way, we have better outcomes, and we have better customer service as well. Patients deserve pricetags.

You know, other solutions out there are expanding healthcare savings accounts where you can use pretax dollars for different opportunities as well.

If you really want me to solve the riddle of the cost of healthcare, we need to make America healthier again. That is why Republicans, under President Trump and Secretary Kennedy, were trying to pass policies which would lead to a healthier America.

Think about it—70 percent of Americans have a chronic disease. You think about heart disease and hypertension, obesity, diabetes, Alzheimer's, cancer, and mental health issues. Ninety percent of the healthcare dollars being spent in this country are spent on those chronic diseases.

Think about our youth. Twenty percent of our youth are on a prescription drug, 30 percent are obese, and 40 percent of our youth have a chronic disease. We have a mental health epidemic in our youth as well.

So if you want to drive down the cost of healthcare, we need to make a healthier America, we need more transparency, we need to promote innovation, and we need to turn patients into consumers again.

Then lastly and most importantly, we need to make America healthy again—and for all the right reasons. The benefit of driving down the cost of healthcare is just one of them. Think about this: America is spending 18 percent of its GDP on healthcare right now. Singapore is spending 4 percent. Most advanced countries are going to spend half of what we do on healthcare.

People ask, well, why are our outcomes worse? It is because we are sick. We have sicker people. The incidence of diabetes, hypertension—all those things are going through the roof. That is why our outcomes aren't as good as other countries' are.

Rural healthcare. Let's talk about rural healthcare for a second. My goodness, do I care about rural healthcare. I was born in a rural hospital. I had an OB practice for 25 years in rural America. I was on call every day, every other day for 25 years. You can call my wife and ask her—we didn't sleep through the night for 25 years. We delivered a baby almost every day. Then I was blessed to lead a group of doctors and run that rural hospital for over a decade as well. I oversaw three health departments. If anybody understands the importance of rural healthcare, I think it would be me. That is why I have spent a lifetime trying to fix all of these riddles that we have right now.

Now, my friends across the aisle say that they are worried that rural hospitals are closing all of a sudden—all of a sudden—and that they want to try to fix this issue. Well, they have actually contributed to the problem.

But here is one of the most hypocritical things I have ever heard since being up here. So the Democrats say that they are closing the government because they want to save rural hospitals, but the first thing they are going to do is take $50 billion away from our rural health transformation funding—$50 billion from rural health transformation funding—something I have been working on with this administration since the New Year, what that would look like if we had the money. But no. What my friends across the aisle want to do is they want to control healthcare; they want to keep throwing good money after bad money. They think that Medicaid is going to save the day.

Let me tell you something about Medicaid. Only 5 percent of Medicaid funding goes to rural America. Five percent of Medicaid funding goes to

rural America. Hospitals and doctors lose money on every Medicaid patient we see. Now, it doesn't mean we shouldn't take care of them. We took care of everybody in our hospital regardless of their ability to pay, regardless if they were a citizen or not. We didn't know, and we didn't care. We went in and took care of these patients. But certainly, running a private OB practice and running a hospital, I realized that we lose money on every Medicaid patient we see.

Having Medicaid is not the same as access to healthcare. Who in the world even thinks that could be the case? Talk to any doctor, talk to any patient that has Medicaid. Ask them—let's say they have a herniated disc in their back. Ask them how long it is going to take to get in to see a neurosurgeon. It is going to take 6 months; it is going to take a year.

So, in reality, probably less than half of the doctors, in a true measure, participate in Medicaid. It has to be the most failed system, the biggest waste of money I have ever seen. There are better solutions out there than Medicaid.

I am so excited about, again, solutions. Republicans have solutions. I am so excited about this transformation fund and the opportunity that does that.

Here is what is really rich—here is what is rich. So there are hospitals closing and pharmacies closing today, tomorrow, last year, but that is a result of the Democrats' failed policies. Our legislation that we passed this year—signature legislation that is going to change the course of America—none of that is going to really kick in for 2 or 3 years.

It is just beyond me for the leader of the Democratic Party to sit up here and cry about hospitals closing in rural America today and blaming Republicans. If there is any hospital closing today, tomorrow, next year, the Democrats own it. They own the failed policy, and America gets that. My gosh, I have never heard something so ridiculous in my life.

But, again, Republicans have solutions, and we want to fix it. One of the ways to fix the failure of why these hospitals are failing is the economy that hospitals—rural hospitals are a reflection of the local economy. As agriculture goes, so goes rural America, so goes these hospitals.

By the way, 97 percent of these rural counties voted for President Trump. He is never going to turn his back on them. We as Republicans are not going to turn our backs on them. I wake up every morning trying to figure out, how do we save rural hospitals and rural America? how do we recruit doctors to rural America? how do we recruit nurses to rural America? And all of a sudden, the Democrats have got salvation here, and they care about it? No. They are hiding behind that issue. They are hiding behind it because they don't have any substance to stand on.

Again, the ACA has been the rule of the land for 15 years now. If there are any hospitals failing today, and there are, it is because of the overregulation of the ACA. Just like banks consolidating, hospitals consolidating, healthcare consolidating—all these different entities are consolidating because of overregulation created by Democrats. Our rural transformation funding is going to set those rural counties free to do what they think is best with the money.

All right. Let's go to the next Democrat argument. Let's talk about these COVID-era subsidies for the ACA plans. What a joke. I just absolutely cannot believe they are going to hide behind this one.

So think back to the original ACA. The ACA sets up funding to help supplement insurance premiums for a group of people based upon their ability to pay. That is probably 70, 80 percent of the premium right now, on average, is the way it was set up to be. In some cases, it was 95 percent.

But then COVID comes along, and the Democrats boost those subsidies, so that now many Americans aren't contributing anything to those particular funds. And what this has led to is mass fraud, OK? So these COVID-era subsidies have led to mass fraud.

Let me put some dollars and cents on this. When the ACA was first written, they thought we would be spending maybe $25, $50 billion a year on those subsidies. Well, we are spending $150 billion a year on these subsidies. We think that probably a third of that is waste, fraud, and abuse, and I could spend the next half hour talking about why we think there is waste, fraud, and abuse within it. But the way it was created allows for waste, fraud, and abuse. I can't fix that today. I can't fix it tomorrow. We need to fund the government and get back to work on this issue, and we know how to do it.

But for Republicans to agree to these subsidies being continued, the first thing we have to do is to address the fraud. I bet that is a 90–10 issue. I bet that 90 percent of Americans would like for us to fix the fraud in that issue and make sure the people who need it the most are getting the help.

So that is one issue on the COVID-era subsidies. The next big issue—I want to go back to premiums, OK. That is the real issue. These premiums are going to go up 20 percent this year. So regardless of what we do here, the premiums are going to go up 20 percent.

That is where the sting is coming from, is how much these premiums are going up, and my friends across the aisle just want to keep throwing money at it. They want this corporate welfare where these subsidies are basically enriching big insurance companies. That is exactly what is happening. These subsidies are basically going to this consolidated insurance business out there.

Most States, like mine, only have two or three insurance carriers left standing. When these subsidies go up for the people with an ACA plan, guess what? They are going to use that as an excuse to increase your plan that you are getting through that hard-working job of yours as well.

So to have a meaningful discussion about these COVID-era subsidies, we need to—No. 1 is to address the fraud, and No. 2 is we need to address the rate of increase of these premiums as well.

And listen to this: Even if this COVID subsidy went away, the Federal Government on average would be paying 80 percent of the premium. So we would be paying 80 percent rather than 90 percent of the premium. But if the premium has gone up 20 percent, just think about the difference on 80 percent versus 90 percent. That is where the sting is truly coming from.

When do Democrats want to have a serious conversation about this, the real conversation about the cost of healthcare?

My friends across the aisle want to bring these two issues together. They want to, you know, take a hostage. In order to keep the government open, they are saying: You have to give us these COVID-era subsidies, to prolong them. They are supposed to expire December 31 of this year. The Democrats passed this. It was supposed to be for COVID, and, like all the other COVID subsidies that drove us into massive debt, there was a sunset on it. They wrote the law. If they didn't want it to sunset, why didn't they continue the program for infinity just like they did with the original subsidies?

So this, to me, is two different issues. We have the issue here of keeping the government open, and we have the issue here of healthcare. I want to take care of both of them, but it is going to take weeks, probably months, for us to come up with a solution for these COVID subsidies. So I don't think it is fair to keep the government closed down because they weren't willing to talk about this.

It is interesting that we didn't hear a thing about this—at least I didn't—from the minority leader, that he was concerned about this, until just a couple days ago. Again, it makes me think he wanted the shutdown. He wanted the shutdown to appease his liberal left base.

Here is another argument the Democrats are making. You know, there is a fight about healthcare for illegal aliens. I don't think anyone can argue that before our working-families tax-cut bill—our signature bill that is going to grow the economy—that before that legislation, that illegal aliens were getting healthcare. Even the CBO—and I hate to pick and choose when I use the CBO numbers—but the CBO said that 2 million illegal aliens were getting healthcare subsidies or free healthcare because of the loose, just unfettered process that States were using to verify who was eligible for Medicare.

That is not me; that is not a Republican; the CBO said 2 million illegal

aliens were getting care each year on the backs of American taxpayers. I don't know if that number is perfectly accurate, but if it is 1 million, 2 million, or 3 million, certainly illegal aliens were getting free healthcare on the backs of American taxpayers.

So when the Democrats want to go in there and gut that bill and end the fixes, the loopholes we closed, I don't know how they can look America in the eye and say that is not the case.

But regardless, I think that is a small issue. I think that is a red herring. That is not really what the issue is. It is just one more thing they can argue about to get America's eyes off the true challenge within their own party.

The minority leader says we are not negotiating. I just think that is such an untruth, that we are not negotiating—my gosh. The Appropriations Committee—the Republican-led Appropriations Committee—has been negotiating since President Trump was—actually, since we were—sworn in, in January.

And we have just nothing but compliments to Senator SUSAN COLLINS and her team and the Democrats on the Appropriations team. They are doing their job, but Leader SCHUMER—Minority Leader SCHUMER—wants to do this negotiation in the back doors. He wants to continue the status quo where, for the government funding, they go back behind a door in a closed office. The cameras are off, and they want to cut a deal.

You can talk about the four corners up here: the Speaker of the House, minority leader of the House, minority leader in the Senate, and then the majority leader, the head of the Senate here, of course, JOHN THUNE.

So Senator SCHUMER thinks they can go behind closed doors—and there are two New Yorkers in that room—and build all their bridges to nowhere. But Republicans want to fund the government in open daylight, through the Appropriations Committee, with the lights on and the cameras on.

The Appropriations Committee passes legislation. There are 12 buckets of funding to fund this discretionary spending that Senate Republicans are trying to lead here—12 buckets of funding. Again, under their great leadership, they have passed 8 of these 12 buckets out of committee. It is almost 90 percent of funding for the Federal Government—discretionary spending, again, of course—that they have already finished the job on.

Senator SUSAN COLLINS has done an incredible job getting it through committee—bipartisan. You look at the votes on these bills, and it is 25 to 0, 23 to 2, 24 to 1—huge bipartisan victories done in the light of day. And then those should come here to the floor, and let America see exactly what is in them.

And if there is a bridge to nowhere in there, let me stand up here and offer an amendment to strike that funding, and then let that Senator defend why his or her State should have this bridge to nowhere.

That is what is supposed to happen in the light of day, but Senator SCHUMER wants to go back to the Dark Ages, where he can go in a back room—a back, New York room—and then cut a deal for all of his bridges to nowhere.

The House, I believe, has passed all 12 of their funding bills out of committee.

Now, we have got three of those across the floor. There are five more sitting there, but Senator SCHUMER refuses to release anybody on his side to vote for them, even though they voted for them in committee. Why? It is part of the political theater. He wants this shutdown.

So I think America sees this, that we wanted to negotiate in good faith, but SCHUMER's idea—Senator SCHUMER's idea—of negotiating is now to go behind closed doors, where he is one of four people in the room, and then go tell the President, who was elected by 28 million people, and he wants to tell him what to do.

So I asked, you know, as we go through this process—I asked myself this morning: So what are AOC and the Squad, who are empowered by the liberal legacy media, asking Senator SCHUMER to do or really telling him what to do? What are AOC, the Squad, the liberal media—what are they demanding from Senator SCHUMER?

Well, they told him to take a hostage, right? So he did. He took a hostage. He took these COVID-era subsidies as hostage and the $1.5 trillion of added funding as hostage, and now they are asking him to shoot the hostage.

So the Squad and Senator SCHUMER, they took the bait. They took the bait—hook, line, and sinker—like jumping into Brer Rabbit's briar patch. And guess what. They are about to get mowed down like dry cornstalks in a Kansas tornado. They took the bait. They took the bait, empowering the White House to finally shrink this Federal Government, this monster of a beast that we have here now.

You know, when Joe Biden was sworn in, in 2021, there were about 2.8 million Federal employees. So President Biden started with 2.8 million. By the time he finished, we had over 3 million Federal employees.

Now, President Trump is going to split the difference there. So we are still not back to pre-COVID, pre-Biden levels of Federal employment.

Look, I am grateful for every Federal employee, and many of them do incredible work. But I think it is no secret that we could all be a little more efficient, that we all could work a little harder. And if we had a few less regulations, I think we would need a few less Federal employees as well.

I don't want to sound callous or not caring. I am grateful for every job an American has. But my goal would be to help move some of these people with some of these Federal jobs and move them into the real world and adding to GDP rather than subtracting from GDP. That would be my goal.

There is a reasonable number of people we need to do the work of the Federal Government, but I just think going from 2.8 million pre-COVID to over 3 million just seems to be too much.

So, like I said, the Squad has led the Democrat Party into Brer Rabbit's briar patch, and they are about to get mowed down like cornstalks in a Kansas twister.

I think the last thing I want to go back to here is that the Democrats were saying that they really want to add $1.5 trillion to our debt. Again, we have $37 trillion in national debt now as a nation. We are spending almost $3 billion a day on interest. That is right, America—$3 billion a day on interest alone, a trillion dollars a year. And they want to add $1.5 trillion to our national debt.

But get this: In November of this last year, America rejected that plan, OK. That is why the voters gave Republicans the White House, the House, and the Senate. They didn't want us to borrow another $1.5 trillion.

So what is motivating the Squad? What is motivating Senator SCHUMER to do this, to shut down the government? What is motivating their lust for power and their control of the American people?

You know, I think the socialists have always thought, if you controlled healthcare, that is the first step in controlling the people, right? So what is motivating them?

I think No. 1 is—let's just be frank here: It is Trump derangement syndrome. I think that is their No. 1 motivation to shut the government down. It is Trump derangement syndrome. They have a hatred for President Trump that I have never seen anything like this before in my life.

I think the second reason is the liberal left has not realized they lost the election. You know, you go through these stages of grief and denial. That is the first one. The liberals have still not realized they lost the election. Seventy-eight million people voted for Republicans to control the House, the Senate, and the White House. They are rejecting the Democrats' lust for power to control Americans, to borrow from our grandchildren. So that is their motivation.

Look, if they want to change these policies, then go win the election. If you want to change the policies, go win the election. You know, I think back to 2020, and the Democrats had a sweep, right? The Democrats swept the elections in 2020, and they added $2 trillion a year in debt. So they grew the budget from about $5 trillion to $7 trillion overnight. But when it came to keeping the government open, the Republicans didn't go back to them and say: Hey, we are going to keep the government open if you decrease your spending by $2 trillion a year.

We didn't take that hostage. We could have. We could have. Does that

make sense, comparing the 2020 election to this election? The Democrats swept in 2020. They came in and added $2 trillion of spending. But over a dozen times, Republicans walked the plank and said: We will keep the government open.

I wasn't happy about it then. I am not happy about it now. I am not happy about the spending levels that we are fighting for right now. I think that they are way too much.

If you want to continue your liberal, socialist policies, Democrats, go win an election. Go win an election. We came through with a bill for America to cut taxes, to grow jobs, to make the government more efficient, and look at what is happening. The gas prices are down. Grocery prices are down. The border is secure. All of those types of things are happening under Republican leadership.

We want to address the cost of healthcare. We truly, truly do. I want to point out that we are just not going to negotiate borrowing another $1.5 trillion for continued throwing money at healthcare issues in order to keep the government open.

Again, these are apples and oranges. We need to open the government back. We need to fund the government for a couple of months—a clean CR. Let Senator COLLINS and her team, working with Democrats, get that other 10 percent of funding across the finish line. In 2 months' time, we can bring those bills to the floor in front of the American public, debate them, offer amendments, make Senators defend their bridges to nowhere, as I call them, and then continue to work on healthcare.

And it is not going to be easy. It is going to be painful. When $5 trillion is being spent on healthcare in this country every year, and all these big corporations are grabbing that money as it goes by their front desk, it is not going to be easy to drive down the cost of healthcare, but we have to do it.

To me, this is common sense. We are asking the Democrats to vote for a clean CR, based upon levels of spending that every Senate Democrat in here that was in office voted for just 7 months ago. Seven months ago, every Democrat in here voted for these spending limits.

Again, a dozen times under Joe Biden, Republicans walked that plank and kept the government open. I pledge to you; I pledge to every Democrat: No one is going to work harder than I will to help solve this riddle for healthcare, focused on driving the cost of healthcare down.

But at the end of the day, the shutdown keeps us from doing the real work of the people, from having real debates about the cost of healthcare, our national debt, our spending, and all those things. During a shutdown, things freeze up here, and we can't do the work that we need to do in our communities to address these different problems.

One of our Presidents once said this, and I am going to quote him:

> I know that it is said that one of the easiest things in the world is to give away somebody else's money. But government does not have money except the money it takes from the people. And so every time we talk about spending money on this or that program—

On healthcare or COVID subsidies—

> let us remember that the government has no money except what it takes from the people. And the people know that.

And they are feeling it. They are feeling the pain of the government taking so much money. That is my quote.

I go back to the President's quote here:

> And the people are tired of big government taking all the money they earn.

Boy, if you are a Senator up here and you are listening to anybody back home, I think you understand folks back home are tired of Big Government taking all the money they can earn.

So I ask my friends across the aisle—and they truly are friends. There is not an enemy. There is not a Democrat I would call an enemy. President Reagan said he had no political enemy, only political opponents. There is no difference than when we see gladiators on Sunday playing these football games, and at the end of the game, they are shaking each other's hands. Both parties should fight for what they think is right. But if we stay fixed on the goals—the common goals—working toward a balanced budget, keeping the government open, driving down the cost of healthcare, and all of these things, I bet most of us agree on those goals.

But in the meantime, we need to keep the government open. We need to pass a clean CR.

Again, let's let the Appropriations Committee continue their negotiation to do their job, as we all work together up here.

So as long as we stay on those same goals—those same goals, like I said—we want to keep the government open. We want to work toward a balanced budget. I want to fix healthcare. I want to fix the cost of healthcare.

To anyone up here who agrees on those same goals, I will reach out my hand across the aisle, and I will pledge that we will listen and work together in good faith. But for today, let's pass a clean CR.

I yield the floor.

The PRESIDING OFFICER (Mr. ROUNDS). The Senator from Nebraska.

Mr. RICKETTS. The government is shut down today, and the responsibility lies squarely on the minority leader and the Democrats. In fact, you can call it his shutdown.

Republicans have offered a clean continuing resolution that would keep government open to allow us to continue working on the appropriations process, and my colleagues on the other side of the aisle have called foul. Somehow this is unfair that we ought to have a negotiation. In fact, they are demanding more than a trillion dollars in new spending to be able to keep the government open for just 7 weeks.

They want money for illegal immigrants to get healthcare. They want more subsidies for the pandemic-era insurance. They want to end the rural healthcare fund that Republicans put in place for our rural hospitals. They demand all of this, saying the clean continuing resolution that we have offered is not sufficient.

Hypocrisy. This is hypocrisy.

Thirteen times in the Biden administration Democrats voted for a continuing resolution. Four times they have voted for this exact level of spending; this budget, four times in the last 18 months.

In fact, I have got a chart here that shows the percentage of Democrat Senators who supported these continuing resolutions, and you can see the numbers are almost 100 percent all the way across. And when it is not 100 percent, it is 98 percent. The minority leader himself voted for this very continuing resolution four times in a row before this case. Hypocrisy.

They are putting these unreasonable, radical-left demands in front of us instead of keeping government open.

Let me share with you a quote from our minority leader. In 2013, he said:

> What if I persuaded my caucus to say, I'm not going to pay our bills unless I get my way? It is a politics of idiocy, of confrontation, of paralysis.

Further, the minority leader said on January 24, 2024:

> Passing the CR, of course, will prevent a harmful and unnecessary government shutdown. No reasonable Member on either side—Democrat or Republican—wants a government shutdown.

Both sides recognize that a government shutdown would mean crushing delays to veterans programs; delays to nutrition programs for women, infants, and children; delayed benefits for our military; and so much more.

Now, as I mentioned, the Democrats have said this is about healthcare, but let me read you a quote from the junior Senator from Connecticut. He said, when talking about healthcare, that ''there is a time and a place to debate healthcare . . . but not when the funding of the Federal Government, and all the lives that are impacted by it, hang in the balance.''

The hypocrisy of the minority leader of the Democrats is breathtaking. It is stunning.

During the Biden administration, they were happy to pass continuing resolutions—happy to. And, in fact, when given the very same continuing resolution, they voted yes on it four times in a row. Now they say no for partisan political reasons, driven by their radical leftwing.

And, again, they say they want to make this about healthcare. How disingenuous. First of all, let's examine the COVID subsidies that they want. First of all, they are the COVID subsidies. These are pandemic subsidies meant for a pandemic.

Folks, news flash: The pandemic has been over for 4 years. The Democrats

were the ones who set the expiration date on it. And the Democrats, if they were so concerned about this, had all of last year to bring it up and address it and extend it, once again, if they had chosen to. They chose not to.

All of a sudden, crying about these subsidies now, just smacks of hypocrisy.

And as I just read you, the junior Senator from Connecticut's remark, when it suited them before, they didn't want to talk about healthcare when they were talking about continuing resolutions and government shutdowns.

Folks, this shutdown does mean that folks in my home State of Nebraska could see services diminish. It could mean that, for example, Social Security offices may be understaffed—Social Security checks are going to go out, but services may be diminished. Women and children will not be able to enroll in the WIC Program. The person who is supposed to help with IRS questions is not available. National parks may be closed. All these services may be degraded and all because the Democrats are holding the American public and Nebraskans in my State hostage for their radical-left demands.

The Democrats should do what they have done 13 times in the Biden administration, vote for a continuing resolution. Help us continue our work on appropriations because that is the way the system is supposed to work.

We have already passed three bipartisan appropriations bills. The Appropriations Committee has more bipartisan bills ready to work on.

This can all be over if the Democrats will simply vote for a continuing resolution that they have already voted yes on four times over the last 18 months and 13 times during the Biden administration.

If the American public is looking for answers, they have to look no further than the Democrats to find out who is responsible for this. Republicans have offered this continuing resolution and have voted for it. And, in fact, three Democrats have voted for the continuing resolution, including an Independent who caucuses with the Democrats.

So we will continue to do our part by voting for this continuing resolution and by continuing to put it up to give the Democrats a chance to get government back open so we can continue the people's business and work on these appropriations bills, which is what we are supposed to be doing.

I yield the floor.

The PRESIDING OFFICER. The Senator from Minnesota.

Ms. KLOBUCHAR. Mr. President, I rise today as millions of Americans stand on the edge of a healthcare cliff. I join my Democratic colleagues in continuing to fight to reopen the government and to prevent Americans' healthcare costs from skyrocketing.

A critical part of governing is finding common ground. You don't always pick your neighbors, as the Presiding Officer knows—we have worked together for many, many years—but you find a way to live next to your neighbors, as we do, and to work with them.

Making healthcare more affordable should be a bipartisan issue. And some of my Republican colleagues know we need to act and we need to get something done and the overwhelming majority of Americans agree. I worked that way in the Senate. For a number of years, I was ranked No. 1 for bipartisan bills and No. 3 for passing bills into law because when we sit down together to work things out, we can get things done.

Courage is about willing to stand next to someone you don't always agree with for the betterment of this country. That means finding some common ground. It doesn't mean saying: My way or the highway. It doesn't mean, when you are the President of the United States, canceling meetings, doing one at the last minute, and then, with the Democratic leaders of our country, putting up a deepfake video that was incredibly offensive, poking at them instead of taking this issue seriously. They came to him in good faith and still do.

Unfortunately, right now, our Republican colleagues are not working with us to find a bipartisan agreement to prevent the government shutdown and address the healthcare crisis. We know that even when they float ideas—which we surely do appreciate—in the end, the President appears to make the call. He made the call on tariffs, even though so many of our Republican colleagues disagree with him on that. He made the call on certain nominees like R.F.K., Jr. He made the call when it came to certain provisions in the ''Big Beautiful Betrayal'' bill, which many of our colleagues didn't like, including the nutrition program decision at the end to reward the 10 States with the highest error rate when it comes to SNAP. I know none of them are in the Midwest.

That is why my Democratic colleagues and I want to reach an agreement, not only with the Republicans in this Chamber, but we also need the President at the table. He prides himself for the ''Art of the Deal,'' and it is time for him to make a deal. We are working so hard to make sure that more than 20 million Americans who rely on the Affordable Care Act—it is called different things in different States; in my State, it is called MNsure—have access to affordable health coverage. It tends to be a lot of individual buyers in the market. It tends to be a lot of small businesses. And over a quarter of the farmers in this country rely on it.

Again, it is called different things in different States, but it is a plan to allow people who maybe aren't at a big corporation to be able to have healthcare. A while back, maybe they didn't want to leave a big company or if they left without being in a big company or in the government or something like that, they couldn't even get healthcare at all. That is why the Affordable Care Act was passed.

I would make a lot of improvements to it, and we do have some opportunities to do that. But right now, we need to make sure we don't push them off a healthcare insurance premium cliff. This is on top of the draconian Medicaid cuts that are going to push 15 million people off their healthcare that were in the One Big Beautiful Bill and also the Medicare cuts, which no one intended to have $500 billion in Medicare cuts, I guess, of our colleagues on the other side. But the debt accumulated from the bill of $4 trillion was so big, it triggered automatic Medicare cuts, which are hitting and going to hit rural hospitals, which they are now putting into their bottom line.

While they are staring that down and the Medicaid cuts, they are also looking at the fact that so many of their patients and people who visit rural clinics—those who often tend to be in the hospitals are on the Affordable Care Act because rural areas—and I am focused on rural areas because I went on a 13-county tour in my State—rural areas tend to have more people that are small business owners percentagewise and also that are farmers and ranchers.

So this is not a December thing; this is not a January thing; this is a now thing because those premiums are hitting November 1 when that market opens up. Right now, millions of Americans are staring down the reality that their healthcare premiums could double. For many families, that will mean making impossible choices to make ends meet or losing coverage altogether.

This is preventable, but we have to act now. Over 20 million Americans are enrolled in an Affordable Care Act health insurance plan. If we don't act, they are going to be forced to make impossible decisions. And that doubling number that says the premiums are going to double came out of a study just this week by the Kaiser Family Foundation. If Congress doesn't come together in a bipartisan way to extend these credits, these families, farmers, ranchers, small business owners, entrepreneurs, seniors, people living in rural communities will have to pay an average of double every month, hundreds of dollars more every month—not every year, every month—to keep their health insurance.

In Minnesota, nearly 90,000 people will see their premiums increase by double digits. You can say: Well, I am not on that kind of healthcare. I work at such and such company. You don't know the day, especially with these tariffs, when people are starting to get laid off at manufacturing companies like John Deere or that a farmer's business goes bankrupt—his farm goes bankrupt because bankruptcies for small farms are at an alltime high in the last 5 years—you don't know when

it is going to be you. It is like a lottery, especially right now, with the crazy things going on in this economy. So even for people who aren't on the Affordable Care Act, this affects them.

For many, this will put healthcare coverage out of reach. This is not political theater, I say to the President, after he posted that offensive video. This is not a joke. These are real Americans who are facing these challenges.

The loss of this tax credit will raise premiums for everyone. Minnesotans have already started to receive notice that their costs will increase. One constituent is bracing for more than a 27-percent increase in their premium next year. Another whose husband's job was just eliminated called the 19-percent increase in health insurance costs their family is facing incomprehensible with the loss of income that they already face. And this is before adding in the extra costs people will be forced to take on if the tax credits are not extended.

So, if you noticed, I used those numbers 19 and 20, and you are thinking: Well, she just said they doubled. This is before that happens. This is what is happening in the market right now because of a number of factors going on that the President should be dealing with.

People are going to be socked with this, smacked with this, right while the price of groceries has been going up. I think the President promised he was going to bring costs down on day 1, and we are on something like day 255, and the opposite is happening. Anyone who goes into a grocery store and walks out and looks at their receipt knows exactly what I am talking about. As to the people who are in the grocery aisle and see the cost of beef, they know what I am talking about. As to the people who get their electricity bills, they know what I am talking about. Those aren't deepfakes. Those aren't fake videos that the President puts up on Truth Social. Those are real bills.

So, especially as this is going on because of these tariffs—and could I just add, since I have the floor here, as to the latest on tariffs on sofas and cabinets and lumber? It is already too expensive for Americans to buy a house or to rent a house or to rent an apartment, and now we are going to see major increases to home furnishings—and while we are in the middle of a housing crisis. It is literally one of the worst things he could do right now, but he did it.

So all that is not nothing. All of that kind of sets the stage for why the healthcare cost, which is one of the most expensive for people just on a yearly basis, is so devastating.

One of my constituents shared that while they planned for higher premiums, they didn't expect a more than $2,000 increase for the same coverage next year. Like so many others, they were concerned that even if they switched to a cheaper plan—and you know how that is. You are betting, and you are trying to guess and estimate what is going to go wrong in your family. Is your kid going to have some kind of surgery or break a leg? Is your husband going to have to have some kind of healthcare checkup that will be expensive? You have to always calculate those things. Like so many others, again, they were thinking ''Well, should I switch to a cheaper plan to save money and then hope I don't get sick?'' and then they would be more exposed to higher costs. Those are the kinds of things people are doing right now.

It is like the woman who JEANNE SHAHEEN had at a spotlight forum, which we did this last week, who had M.S. She had actually talked to her doctor about whether she could ration—kind of like people used to do with insulin for diabetes before we put those caps on insulin—could she ration her medication for M.S. The doctor said: No. That is not how this works. It will just grow the pressure in your brain and make your symptoms worse.

Another Minnesotan wrote to me that without the tax credits, their family of four would have to downgrade their health plan and spend significantly more on their health insurance than they do on their mortgage.

Another said that he expected his family would have to pay an additional $16,000 per year for their health coverage if they had no healthcare tax credits.

One Minnesotan shared:

> I cannot absorb additional costs and will be forced into a catastrophic plan if these reported double digit increases go into effect.

Just because someone can't afford to stay insured doesn't mean they need healthcare less.

One of the things that I learned that maybe I hadn't thought through when I went to these rural hospitals was the fact that because there is a high percentage of these farmers and people in small towns on these plans—ours is called MNsure, like I said—they are already hit by the Medicaid cuts—the hospitals—by the Medicare cuts because it is an older population, but they actually cared a lot about this—the doctors, the nurses, the people running the hospitals—because they know that the people won't be able to afford this if these premiums double. They will choose not to get healthcare insurance. Then what will happen is they will end up in their emergency rooms in hospitals that are already strapped thin, and they won't be able to afford—they will treat them, but they won't be able to afford it for a long period of time. So they, time and time again, mention to me that these affordable tax credits expiring or not being maintained will create a major problem.

Already, approximately one-third of Americans report not taking medications as prescribed due to the costs.

Jason, from Pennsylvania, was able to get lifesaving coverage when he was diagnosed with thyroid cancer, through the Affordable Care Act marketplace.

He said:

> It's only because of the premium tax credits that I've been able to afford that coverage.

Now faced with the expiration of these credits, he understands the consequences for people like him.

He said:

> If you're faced with a choice of bankruptcy or debt or saving your life, you're probably going to choose your life, but the consequences of that, of having an immense amount of debt—the rest of your life could be ruined because of that.

Another cancer survivor who has always made health insurance a priority also fears what unaffordable health insurance could mean for patients like her.

She said:

> It means that I don't have to wait around . . . to find out about a disease that could have been cured if it had been detected soon enough. [The insurance] means I don't have to forgo my entire life savings and my home because of medical bills. I don't have to forgo lifesaving treatment because I can't afford it, and that's all about to change. Without the tax credit, I don't know if I'm gonna be able to afford health care—the kind of health care that's going to save my life.

Already, as I noted, because of Medicaid cuts that were passed in the big, beautiful betrayal of a bill, more than 300 rural hospitals, 200 health centers, and 500 nursing homes are likely to close. This means less accessible care for rural communities, longer drives to access care, fewer places to seek care in an emergency, and more hours taken away from work for more caregiving or other responsibilities. Fewer patients will go to that doctor's visit or get that lifesaving screening. They will not get the surgeries they need. Many will get sicker. Ultimately, as I noted, more patients are going to end up in emergency rooms, and these hospitals are going to have to take on the additional burden of more uncompensated care.

None of this happens in a vacuum. As I noted, these Medicaid cuts—and Medicaid provides healthcare for at least one in five rural Minnesotans, more than 31 percent of children in our State, and more than half of all nursing home residents across our State. So this is about seniors, people with disabilities, and kids, and that is why Medicaid is so important.

For me, my dad, in his later years, got late-onset Alzheimer's. He was in one place, and then we moved him to another place. But I knew the exact date as to when his savings were going to go away, and we were going into those savings. Sadly, we lost him. But I knew that exact date because I was going to have to move him to another nursing home—another assisted living—that took Medicaid, and I made plans with them. I knew that date.

So many people in this country know that date. Even if they are not a senior who is relying on Medicaid, their kids, their spouses, their grandkids kind of know when those savings—if they had

any savings to begin with—are going to run out.

So Medicaid goes way beyond the individuals who have no savings at all. It actually helps people who do have some savings. It helps people who have worked their lives through, like my dad. Medicaid is there as a safety net for people.

Over the last few months, I have heard from thousands of constituents, including seniors in Minnesota, from Sunrise Village in Milaca that I visited, to Senior Living at Watkins in Winona, to the Pillars of Prospect Park and Episcopal Homes in the metro. They are worried about their healthcare.

I heard from one constituent from Inver Grove Heights, who told me that Medicaid helps her to afford the cost of her father's memory care.

I think about what a constituent who works with adults with disabilities told me. She is a mental health therapist for a woman who had a tracheotomy and is wheelchair-bound and requires nursing care. She is also the aunt of a man with Down syndrome, with many needs, who is in a residential home.

She said: I am concerned about the possible Medicaid service cuts to the people who most need it.

I have also heard from a constituent named Lola, whose daughter was diagnosed with leukemia. A social worker advised Lola that her employer-based insurance may not cover the cancer treatments her daughter needed, and she connected her with Medicaid. She said that ''Medicaid helped completely'' with the surgeries and the T-cell therapy. Lola said, ''Using my own insurance would have caused a lot of delays, because it would not have covered'' what she needed.

I heard from Robby, who, after years in an adult foster care facility, now lives independently with a roommate because of Medicaid's disability waiver and community-based services.

I have gotten to meet some of these incredible Minnesotans while visiting care providers who help people with disabilities.

I think about the progress we have made so people can either live in their homes or they can live in a group home, and they can have jobs. We just can't go backwards.

People will feel the impacts of these cuts, and we know it.

I will close with this: After learning that her insurance cost is set to skyrocket next year, a woman asked:

What can you and the Senate do to make sure I don't have to stop getting my insurance?

We can do something, and it is something that so many of my colleagues agree with, especially after the cuts that were made, especially after the bludgeoning tariffs and what they are doing to the cost of things for people. It is not going to fix everything, that is for sure, but it is going to save a lot of lives, and it is going to help people contain costs so they don't go over that cliff.

As Minnesota's former Senator—I have his desk—Hubert Humphrey once said: The moral test of government isn't just how it treats the young and the healthy; it is also how it treats the sick, the elderly, and people with disabilities. That is definitely true for us right now, and I believe this is a moral test for all Americans.

At a time when so many families are struggling just to make ends meet, we can't sit back here and just play a blame game and look at the polls and da, da, da. We can do something. It is really pretty simple: We must work to protect Americans' access to healthcare. We must protect our rural hospitals. We must address our healthcare crisis.

As I know, it is not a December or a January problem, it is a now problem, and it is completely within our grasp to do this, and it is certainly within the President's grasp to bring his party with him.

So stop, Mr. President, posting those fake, offensive videos, and start helping Americans with their healthcare.

I yield the floor.

The PRESIDING OFFICER (Mr. CURTIS). The majority leader.

LEGISLATIVE SESSION

MORNING BUSINESS

Mr. THUNE. Mr. President, I ask unanimous consent that the Senate resume legislative session and be in a period of morning business, with Senators permitted to speak therein for up to 10 minutes each.

The PRESIDING OFFICER. Without objection, it is so ordered.

ARMS SALES NOTIFICATION

Mr. RISCH. Mr. President, section 36(b) of the Arms Export Control Act requires that Congress receive prior notification of certain proposed arms sales as defined by that statute. Upon such notification, the Congress has 30 calendar days during which the sale may be reviewed. The provision stipulates that, in the Senate, the notification of proposed sales shall be sent to the chairman of the Senate Foreign Relations Committee.

In keeping with the committee's intention to see that relevant information is still available to the full Senate, I ask unanimous consent to have printed in the RECORD the notifications that have been received. If the cover letter references a classified annex, then such an annex is available to all Senators in the office of the Foreign Relations Committee, room SD–423.

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

DEFENSE SECURITY COOPERATION AGENCY,
Washington, DC.

Hon. JAMES E. RISCH,
Chairman, Committee on Foreign Relations, U.S. Senate, Washington, DC.

DEAR MR. CHAIRMAN: Pursuant to the reporting requirements of Section 36(b)(1) of the Arms Export Control Act, as amended, we are forwarding herewith Transmittal No. 25–76, concerning the Army's proposed Letter(s) of Offer and Acceptance to the Government of Canada for defense articles and services estimated to cost $1.75 billion. We will issue a news release to notify the public of this proposed sale upon delivery of this letter to your office.

Sincerely,

MARY BETH MORGAN
(For Michael F. Miller, Director).

Enclosures.

TRANSMITTAL NO. 25–76

Notice of Proposed Issuance of Letter of Offer Pursuant to Section 36(b)(1) of the Arms Export Control Act, as Amended

(i) Prospective Purchaser: Government of Canada.

(ii) Total Case Estimated Value:

Major Defense Equipment* $1.58 billion.

Other $170 million.

Total $1.75 billion.

(iii) Description and Quantity or Quantities of Articles or Services under Consideration for Purchase:

Major Defense Equipment (MDE):

Twenty-six (26) M142 High Mobility Artillery Rocket Systems (HIMARS).

One hundred thirty-two (132) M31A2 Guided Multiple Launch Rocket System (GMLRS) Unitary pods with Insensitive Munitions Propulsion System (IMPS).

One hundred thirty-two (132) M30A2 GMLRS Alternative Warhead (AW) pods with IMPS.

Thirty-two (32) M403 Extended Range (ER) GMLRS AW pods with IMPS.

Thirty-two (32) M404 ER GMLRS Unitary pods with IMPS.

Sixty-four (64) M57 Army Tactical Missile System (ATACMS) pods.

Non-Major Defense Equipment: The following non-MDE items will also be included: Low Cost Reduced Range Practice Rocket pods; interactive electronic technical manuals; integration support services; spare parts; tool kits; test equipment; contractor logistics support; training; training equipment; technical assistance; technical publications; transportation; Type 1 radios (AN/PRC–160 and AN/PRC–167); 7800I intercom equipment; Simple Key Loaders (SKL); U.S. Government and contractor technical, engineering, and logistics personnel services; and other related elements of logistics and program support.

(iv) Military Department: Army (CN–B–VBV).

(v) Prior Related Cases, if any: None.

(vi) Sales Commission, Fee, etc., Paid, Offered, or Agreed to be Paid: None known at this time.

(vii) Sensitivity of Technology Contained in the Defense Article or Defense Services Proposed to be Sold: See Attached Annex.

(viii) Date Report Delivered to Congress: October 1, 2025.

* As defined in Section 47(6) of the Arms Export Control Act.

POLICY JUSTIFICATION

Canada—M142 High Mobility Artillery Rocket Systems

The Government of Canada has requested to buy twenty-six (26) M142 High Mobility Artillery Rocket Systems (HIMARS); one hundred thirty-two (132) M31A2 Guided Multiple Launch Rocket System (GMLRS) Unitary pads with Insensitive Munitions Propulsion System (IMPS); one hundred thirty-two (132) M30A2 GMLRS Alternative Warhead (AW) pods with IMPS; thirty-two (32) M403 Extended Range (ER) GMLRS AW pods with IMPS; thirty-two (32) M404 ER GMLRS Unitary pods with IMPS; and sixty-four (64) M57 Army Tactical Missile System (ATACMS)

pods. The following non-MDE items will be included: Low Cost Reduced Range Practice Rocket pods; interactive electronic technical manuals; integration support services; spare parts; tool kits; test equipment; contractor logistics support; training; training equipment; technical assistance; technical publications; transportation; Type 1 radios (AN/PRC–160 and AN/PRC–167); 7800I intercom equipment; Simple Key Loaders (SKL); U.S. Government and contractor technical, engineering, and logistics personnel services; and other related elements of logistics and program support. The estimated total cost is $1.75 billion.

This proposed sale will support the foreign policy and national security objectives of the United States by helping to improve the military capability of Canada, a North Atlantic Treaty Organization (NATO) Ally that is an important force for ensuring political stability and economic progress and is a contributor to military, peacekeeping, and humanitarian operations around the world.

The proposed sale will improve Canada's ability to meet current and future threats by providing the M142 HIMARS long range precision strike system and munitions. This capability will protect Canada by improving Canada's contribution to collective hemispheric defense and to defense and deterrence in Europe, as directed by NATO's defense plans. Canada will have no difficulty absorbing these articles and services into its armed forces.

The proposed sale of this equipment and support will not alter the basic military balance in the region.

The principal contractor will be Lockheed Martin, located in Grand Prairie, TX. The purchaser typically requests offsets. Any offset agreement will be defined in negotiations between the purchaser and the contractor.

Implementation of this proposed sale will require multiple trips to Canada involving up to twenty U.S. Government and up to fifteen contractor representatives for program management reviews to support the program. Travel is expected to occur approximately twice per year as needed to support equipment fielding and training.

There will be no adverse impact on U.S. defense readiness as a result of this proposed sale.

TRANSMITTAL NO. 25–76

Notice of Proposed Issuance of Letter of Offer Pursuant to Section 36(b)(1) of the Arms Export Control Act

Annex Item No. vii

(vii) Sensitivity of Technology:

1. The M142 High Mobility Artillery Rocket System (HIMARS) is a C–130 transportable wheeled launcher mounted on a 5-ton Family of Medium Tactical Vehicles truck chassis. HIMARS is the modern Army-fielded version of the Multiple Launch Rocket System (MLRS) M270 launcher and can are all of the MLRS Family of Munitions (FOM), including the Guided Multiple Launch Rocket System (GMLRS) and Army Tactical Missile System (ATACMS). Utilizing the MLRS FOM, the HIMARS can engage targets between 15 and 300 kilometers with GPS-aided precision accuracy.

2. The GMLRS M31A2 Unitary (GMLRS–U) is the Army's primary munition for units fielding the M142 HIMARS and M270A1 MLRS launchers. The M31 Unitary is a solid propellant artillery rocket that uses Global Positioning System/Precise Positioning Service (GPS/PPS) aided inertial guidance provided by Selective Availability Anti-Spoofing Module (SAASM) or M–Code. It accurately and quickly delivers a single high-explosive blast fragmentation warhead to targets at ranges from 15–70 kilometers. The rockets are fired from a launch pod container that also serves as the storage and transportation container for the rockets. Each rocket pod holds six rockets.

3. The M30A2 GMLRS Alternative Warhead (GMLRS–AW) shares a greater than 90% commonality with the M31A1 Unitary. The GMLRS–AW replaces the GMLRS–U's high explosive warhead with a 200 pound fragmentation warhead of pre-formed tungsten penetrators to optimize for effectiveness against large area and imprecisely located targets. The munitions otherwise share a common motor, GPS/PPS-aided inertial guidance provided by SAASM or M–Code, control system, fusing mechanism, multi-option height of burst capability, and effective range between 15 and 70 kilometers.

4. The Extended Range Guided Multiple Launch Rocket System (ER GMLRS) provides a persistent, responsive, all-weather, rapidly deployed, long-range, surface-to-surface, area- and point-precision strike capability. The M403 Alternative Warhead variant carries a 200 pound fragmentation assembly filled with high explosives which are optimized for effectiveness against large area and imprecisely located targets. The M404 Unitary variant is a 200 pound class Unitary with a steel blast fragmentation case designed for low collateral damage against point targets. The ER GMLRS maintains the accuracy and effectiveness demonstrated by the baseline GMLRS out to a maximum range of 150 km (double that of the baseline GMLRS) while also including a new height of burst capability.

5. The M57 Army Tactical Missile System (ATACMS) is a conventional, semi-ballistic missile that utilizes a 500–pound high explosive warhead. It has an effective range of between 70 and 300 kilometers and has increased accuracy over previous versions of the ATACMS due to a GPS/PPS aided navigation system provided by SAASM or M–Code.

6. The AN/PRC–160 is a high frequency tactical radio communications for vehicular and dismounted command and control operations. The final end-items are L3Harris AN/PRC–160 multi-channel manpack radios with a Micro Global Positioning System (GPS) receiver application module (MicroGRAM) receiver card and SAASM.

7. The AN/PRC–167 is a multi-domain, multi-channel, tactical, narrow and wideband dual transceiver radio system with Type 1 encryption and SAASM GPS location and timing capabilities. The system can provide wide-band high-assurance self-healing networking capabilities and Mobile User Objective System over-the-horizon capabilities. Each transceiver is software programmable and operates in the 30–512 MHz and 764–2600 MHz frequency ranges.

8. The highest level of classification of defense articles, components, and services included in this potential sale is SECRET.

9. If a technologically advanced adversary were to obtain knowledge of the specific hardware and software elements, the information could be used to develop countermeasures that might reduce weapon system effectiveness or be used in the development of a system with similar or advanced capabilities.

10. A deterrnination has been made that Canada can provide substantially the same degree of protection for the sensitive technology being released as the U.S. Government. This proposed sale is necessary in furtherance of the U.S. foreign policy and national security objectives outlined in the Policy Justification.

11. All defense articles and services listed in this transmittal have been authorized for release and export to the Government of Canada.

ARMS SALES NOTIFICATION

Mr. RISCH. Mr. President, section 36(b) of the Arms Export Control Act requires that Congress receive prior notification of certain proposed arms sales as defined by that statute. Upon such notification, the Congress has 30 calendar days during which the sale may be reviewed. The provision stipulates that, in the Senate, the notification of proposed sales shall be sent to the chairman of the Senate Foreign Relations Committee.

In keeping with the committee's intention to see that relevant information is still available to the full Senate, I ask unanimous consent to have printed in the RECORD the notifications that have been received. If the cover letter references a classified annex, then such an annex is available to all Senators in the office of the Foreign Relations Committee, room SD–423.

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

DEFENSE SECURITY COOPERATION AGENCY,
Washington, DC.

Hon. JAMES E. RISCH,
Chairman, Committee on Foreign Relations, U.S. Senate, Washington, DC.

DEAR MR. CHAIRMAN: Pursuant to the reporting requirements of Section 36(b)(1) of the Arms Export Control Act, as amended, we are forwarding herewith Transmittal No. 25–71, concerning the Air Force's proposed Letter(s) of Offer and Acceptance to the Republic of Korea for defense articles and services estimated to cost $34 million. We will issue a news release to notify the public of this proposed sale upon delivery of this letter to your office.

Sincerely,

MARY BETH MORGAN
(for Michael F. Miller, Director).

Enclosures.

TRANSMITTAL NO. 25–71

Notice of Proposed Issuance of Letter of Offer Pursuant to Section 36(b)(1) of the Arms Export Control Act, as amended

(i) Prospective Purchaser: Republic of Korea.

(ii) Total Estimated Value:
Major Defense Equipment * $32 million.
Other $2 million.
Total $34 million.

(iii) Description and Quantity or Quantities of Articles or Services under Consideration for Purchase:

Major Defense Equipment (MDE): Forty-four (44) AGM–65G2 Maverick tactical missiles.

Non-Major Defense Equipment: The following non-MDE items will be included: U.S. Government and contractor engineering; technical, and logistics support services; and other related elements of logistics and program support.

(iv) Military Department: Air Force (KS–D–YBC).

(v) Prior Related Cases, if any: KS–D–YHF.

(vi) Sales Commission, Fee, etc., Paid, Offered, or Agreed to be Paid: None known at this time.

(vii) Sensitivity of Technology Contained in the Defense Article or Defense Services Proposed to be Sold: See Attached Annex.

(viii) Date Report Delivered to Congress: October 1, 2025.

*As defined in Section 47(6) of the Arms Export Control Act.

POLICY JUSTIFICATION

Republic of Korea—AGM–65G2 Maverick Tactical Missiles

The Republic of Korea has requested to buy forty-four (44) AGM–65G2 Maverick tactical missiles. The following non-Major Defense Equipment items will be included: U.S. Government and contractor engineering; technical, and logistics support services; and other related elements of logistics and program support. The estimated total cost is $34 million.

This proposed sale will support the foreign policy and national security objectives of the United States by improving the security of a major ally that is an important force for political stability and economic progress in the Indo-Pacific region.

This proposed sale will improve the Republic of Korea's capability to meet current and future threats by increasing its critical air defense capability to deter aggression in the region and to ensure interoperability with U.S. forces. The Republic of Korea already has Maverick missiles in its inventory and will have no difficulty absorbing these articles into its armed forces.

The proposed sale of this equipment and support will not alter the basic military balance in the region.

The principal contractor will be RTX Corporation, located in Arlington, VA. The purchaser typically requests offsets. At this time, the U.S. Government is not aware of any offset agreement proposed in connection with this potential sale. Any offset agreement will be defined in negotiations between the purchaser and the contractor.

Implementation of this proposed sale will not require the assignment of any additional U.S. Government or contractor representatives to the Republic of Korea.

There will be no adverse impact on U.S. defense readiness as a result of this proposed sale.

TRANSMITTAL NO. 25–71

Notice of Proposed Issuance of Letter of Offer Pursuant to Section 36(b)(1) of the Arms Export Control Act

Annex Item No. vii

(vii) Sensitivity of Technology:

1. The AGM–65G2 Maverick tactical missile is an air-to-ground missile with a lock on before launch, day or night capability. The AGM–65G2 has an imaging infrared (IIR) guidance system that allows for locking onto larger targets, such as ships. The IIR can track heat generated by a target and provides the pilot with a pictorial display of the target during darkness and hazy or inclement weather. The warhead on the AGM–65G2 is a heavyweight penetrator warhead.

2. The highest level of classification of defense articles, components, and services included in this potential sale is SECRET.

3. If a technologically advanced adversary were to obtain knowledge of the specific hardware and software elements, the information could be used to develop countermeasures that might reduce system effectiveness or be used in the development of a system with similar or advanced capabilities.

4. A determination has been made that the Republic of Korea can provide substantially the same degree of protection for the sensitive technology being released as the U.S. Government. This sale is necessary in furtherance of the U.S. foreign policy and national security objectives outlined in the Policy Justification.

5. All defense articles and services listed in this transmittal have been authorized for release and export to the Republic of Korea.

ARMS SALES NOTIFICATION

Mr. RISCH. Mr. President, section 36(b) of the Arms Export Control Act requires that Congress receive prior notification of certain proposed arms sales as defined by that statute. Upon such notification, the Congress has 30 calendar days during which the sale may be reviewed. The provision stipulates that, in the Senate, the notification of proposed sales shall be sent to the chairman of the Senate Foreign Relations Committee.

In keeping with the committee's intention to see that relevant information is still available to the full Senate, I ask unanimous consent to have printed in the RECORD the notifications that have been received. If the cover letter references a classified annex, then such an annex is available to all Senators in the office of the Foreign Relations Committee, room SD–423.

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

DEFENSE SECURITY COOPERATION AGENCY,
Washington, DC.

Hon. JAMES E. RISCH,
Chairman, Committee on Foreign Relations, U.S. Senate, Washington, DC.

DEAR MR. CHAIRMAN: Pursuant to the reporting requirements of Section 36(b)(5)(C) of the Arms Export Control Act (AECA), as amended, we are forwarding Transmittal No. 25–1H. This notification relates to enhancements or upgrades from the level of sensitivity of technology or capability described in the Section 36(b)(1) AECA certification 15–06 of March 23, 2015.

Sincerely,

MARY BETH MORGAN
(For Michael F. Miller, Director).

Enclosure.

TRANSMITTAL NO. 25–1H

Report of Enhancement or Upgrade of Sensitivity of Technology or Capability (Sec. 36(b)(5)(C), AECA)

(i) Prospective Purchaser: Government of the Netherlands.

(ii) Sec. 36(b)(1), AECA Transmittal No.: 15–06; Date: March 23, 2015; Implementing Agency: Army.

(iii) Description: On March 23, 2015, Congress was notified by congressional certification transmittal number 15–06 of the possible sale, under Section 36(b)(1) of the Arms Export Control Act, of seventeen (17) CH–47F Cargo Helicopters with customer unique post-modifications; forty-six (46) T55–GA–714A Aircraft Turbine Engines with Hydro-Mechanical Assembly, (thirty-four (34) installed and twelve (12) spares); forty-one (41) Embedded Global Positioning System/Inertial Navigation Systems (EGIs); fifty-four (54) AN/ARC–231 Ultra High Frequency/Very High Frequency Radios; twenty-one (21) AN/ARC–220 High Frequency Radios; twenty-one (21) AN/APX–123A Identification Friend or Foe Transponders; and forty-one (41) AN/ARC–201D Very High Frequency Radios. Also included were spare and repair parts, support equipment, tools and test equipment, aircraft ferry and refueling support, personnel training and training equipment, publications and technical documentation, U.S. government and contractor technical, and logistics support services; and other related elements of logistics and program support. The estimated total cost was $1.05 billion. Major Defense Equipment (MDE) constituted $900 million of this total.

On January 24, 2017, Congress was notified by congressional certification transmittal number 0Z–16 of the inclusion of sixteen (16) AN/AAR–57A(V)8 Common Missile Warning System equipment as MDE. The MDE value of this addition is estimated at $17.2M. In addition, this transmittal updated the sale to include Blue Force Tracker Aviation (BFT–A), KIV–77 a Common Crypto Applique for Identification Friend or Foe (IFF) and the AN/PYQ–10 Simple Key Loaders (SKL). The total estimated case value remained $1.05 billion, however the estimated cost of MDE increased to $917.2 million.

On July 10, 2017, Congress was notified by congressional certification transmittal number 0E–17 of the inclusion of sixteen (16) AN/APR–39A(V)1 Radar Signal Detecting Sets. The addition of this item did not result in a change to the estimated cost of MDE of $917.2 million. The total estimated case value remained $1.05 billion.

On August 8, 2018, Congress was notified by congressional certification transmittal number 18–0E of the inclusion of seven (7) AN/AAR–57A(V)8 Common Missile Warning Systems (CMWS), eight (8) AN/ALQ–212 Advance Threat Infrared Countermeasures (ATIRCM), seven (7) APR–39C(V)1 Radar Signal Detecting Sets, and fourteen (14) CN–1689–(H–764GU) Embedded Global Positioning System/Inertial Navigation (EGI) Systems. All four of these systems are MDE. Also included in this possible sale were associated equipment, support, and services. The addition of these systems resulted in an increase in MDE cost of $425 million. The notified MDE total increased to $1.342 billion with the total case value increasing to $1.475 billion.

On July 28, 2022, Congress was notified by congressional certification transmittal number 0M–22 of the inclusion of fifty-two (52) AN/ARC–231A (RT 1987) radios. The estimated value of the additional MDE items is $15 million, but the addition did not result in a change to the notified MDE total of $1.342 billion. The total case value remained $1.475 billion.

This transmittal notifies the inclusion of the following MDE items: ten (10) OT–228/U Common Infrared Countermeasure (CIRCM) systems. The following non-MDE items will also be included: U.S. Government technical assistance; incidental travel; transportation; new equipment training; technical data; reports; compatibility testing; firing tables; ancillary items; and other related elements of logistics and program support. The estimated total cost of the new items is $85 million. The estimated total cost of the new MDE items is $65 million, resulting in a revised estimated MDE cost of $1.407 billion. The revised estimated total case value is $1.560 billion.

(iv) Significance: This notification is being provided as the MDE items were not enumerated in the original notification. The inclusion of this MDE represents an increase in capability over what was previously notified.

(v) Justification: This proposed sale will support the foreign policy and national security objectives of the United States by improving the security of a NATO Ally which is an important force for political stability and economic progress in Europe.

(vi) Sensitivity of Technology:

Common Infrared Countermeasure (CIRCM) is a next-generation lightweight, laser-based, infrared countermeasure system for rotary-wing, tilt-rotor, and small fixed-wing aircraft. CIRCM provides near-spherical coverage of the host platform to defeat infrared-seeking threat missiles. CIRCM employs a pointing and tracking system that acquires and tracks the incoming missile. CIRCM jams the missile by using modulated laser energy, thus degrading the tracking capability of the missile and causing it to miss the aircraft.

The highest level of information that may be transferred in support of this proposed sale is classified SECRET.

If a technologically advanced adversary were to obtain knowledge of the specific hardware and software elements, the information could be used to develop countermeasures which might reduce weapon system effectiveness or be used in the development of a system with similar or advanced capabilities.

(vii) Sensitivity of Technology Contained in the Defense Article or Defense Services Proposed to be Sold: See Attached Annex.

(viii) Date Report Delivered to Congress: October 1, 2025.

*As defined in Section 47(6) of the Arms Export Control Act.

MESSAGES FROM THE PRESIDENT

Messages from the President of the United States were communicated to the Senate by Ms. Kelly, one of his secretaries.

EXECUTIVE MESSAGES REFERRED

As in executive session the Presiding Officer laid before the Senate messages from the President of the United States submitting sundry nominations and withdrawal which were referred to the appropriate committees.

(The messages received today are printed at the end of the Senate proceedings.)

EXECUTIVE AND OTHER COMMUNICATIONS

The following communications were laid before the Senate, together with accompanying papers, reports, and documents, and were referred as indicated:

EC–1931. A communication from the Secretary of the Treasury, transmitting, pursuant to law, a six-month periodic report on the national emergency that was declared in Executive Order 13664 with respect to South Sudan; to the Committee on Banking, Housing, and Urban Affairs.

EC–1932. A communication from the Congressional and Public Affairs Specialist, Bureau of Industry and Security, Department of Commerce, transmitting, pursuant to law, the report of a rule entitled ''Additions and Revisions to the Entity List'' (RIN0694–AK26) received in the Office of the President of the Senate on September 30, 2025; to the Committee on Banking, Housing, and Urban Affairs.

EC–1933. A communication from the President of the United States, transmitting, pursuant to law, a report of the continuation of the national emergency with respect to the situation in and in relation to Syria that was declared in Executive Order 13894 of October 14, 2019; to the Committee on Banking, Housing, and Urban Affairs.

REPORTS OF COMMITTEES

The following reports of committees were submitted:

By Ms. MURKOWSKI, from the Committee on Indian Affairs, without amendment:

S. 105. A bill to direct the Secretary of the Interior to complete all actions necessary for certain land to be held in restricted fee status by the Oglala Sioux Tribe and Cheyenne River Sioux Tribe, and for other purposes (Rept. No. 119–71).

H.R. 165. An act to direct the Secretary of the Interior to complete all actions necessary for certain land to be held in restricted fee status by the Oglala Sioux Tribe and Cheyenne River Sioux Tribe, and for other purposes (Rept. No. 119–72).

INTRODUCTION OF BILLS AND JOINT RESOLUTIONS

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

By Mr. LEE (for himself, Mrs. BLACKBURN, Mr. BARRASSO, Ms. LUMMIS, Mrs. HYDE-SMITH, and Mr. SCOTT of Florida):

S. 2967. A bill to address the management by certain Federal land management agencies over Federal land along the southern border and northern border, and for other purposes; to the Committee on Energy and Natural Resources.

ADDITIONAL COSPONSORS

S. 2918

At the request of Mr. WHITEHOUSE, the names of the Senator from Mississippi (Mr. WICKER) and the Senator from Colorado (Mr. BENNET) were added as cosponsors of S. 2918, a bill to amend the Rebuilding Economic Prosperity and Opportunity for Ukrainians Act to improve the implementation of the seizure of Russian sovereign assets for the benefit of Ukraine, and for other purposes.

S. 2965

At the request of Ms. WARREN, the name of the Senator from Vermont (Mr. SANDERS) was added as a cosponsor of S. 2965, a bill to prohibit the use of the Exchange Stabilization Fund of the Department of the Treasury to bail out Argentina's financial markets.

AMENDMENTS SUBMITTED AND PROPOSED

SA 3922. Mr. HEINRICH submitted an amendment intended to be proposed to amendment SA 3748 proposed by Mr. WICKER (for himself and Mr. REED) to the bill S. 2296, to authorize appropriations for fiscal year 2026 for military activities of the Department of Defense, for military construction, and for defense activities of the Department of Energy, to prescribe military personnel strengths for such fiscal year, and for other purposes; which was ordered to lie on the table.

TEXT OF AMENDMENTS

SA 3922. Mr. HEINRICH submitted an amendment intended to be proposed to amendment SA 3748 proposed by Mr. WICKER (for himself and Mr. REED) to the bill S. 2296, to authorize appropriations for fiscal year 2026 for military activities of the Department of Defense, for military construction, and for defense activities of the Department of Energy, to prescribe military personnel strengths for such fiscal year, and for other purposes; which was ordered to lie on the table; as follows:

At the appropriate place in title I, insert the following:

SEC. 1____. MULTIYEAR PROCUREMENT AUTHORITY FOR ULTRA-HIGH-PURITY NUCLEAR-GRADE GRAPHITE.

(a) FINDINGS.—Congress finds the following:

(1) Executive Order 13953 (30 U.S.C. 1601 note) of President Donald J. Trump determined that—

(A) ''our Nation's undue reliance on critical minerals, in processed or unprocessed form, from foreign adversaries constitutes an unusual and extraordinary threat'' that is a ''national emergency'';

(B) ''the United States is 100 percent reliant on imports for graphite''; and

(C) ''China produces . . . almost all of the world's . . . high-purity graphite''.

(2) There are no domestic or allied sources of ultra-high-purity nuclear-grade graphite.

(b) AUTHORITY FOR MULTIYEAR PROCUREMENT.—Subject to section 3501 of title 10, United States Code, the Secretary of Defense shall enter into one or more multiyear contracts for the procurement of 1,500 metric tonnes of ultra-high-purity nuclear-grade graphite per year over the covered period, from the sole known source of such graphite in North America, in the amount of $60,000,000 per year.

(c) AUTHORITY FOR ADVANCE PROCUREMENT.—The Secretary of Defense shall enter into one or more contracts, beginning in fiscal year 2026, for advance procurement associated with ultra-high-purity nuclear-grade graphite for which authorization to enter into a multiyear procurement contract is provided under subsection (b), in economic order quantities consistent with this section.

(d) CONDITION FOR OUT-YEAR CONTRACT PAYMENTS.—A contract entered into under subsection (b) shall provide that any obligation of the United States to make a payment under the contract for a fiscal year after fiscal year 2026 is subject to the availability of appropriations or funds for that purpose for such later fiscal year.

(e) FUNDING.—The amount authorized to be appropriated by this Act for purchases of strategic and critical materials under the Defense Production Act of 1950 (50 U.S.C. 4501 et seq.) is hereby increased by $60,000,000, with the amount of the increase to be used for the procurement of 1,500 metric tonnes of ultra-high-purity nuclear-grade graphite.

(f) COVERED PERIOD DEFINED.—In this section, the term ''covered period'' means the period—

(1) beginning on the date of the enactment of this Act; and

(2) ending on the date that is, at minimum, 17 years after such date of enactment, and, at maximum, 50 years after such date of enactment.

ORDERS FOR FRIDAY, OCTOBER 3, 2025

Mr. THUNE. Mr. President, I ask unanimous consent that when the Senate completes its business today, it stand adjourned until 11:30 a.m. on Friday, October 3; that following the prayer and pledge, the Journal of proceedings be approved to date, the morning hour be deemed expired, the time for the two leaders be reserved for their use later in the day, morning business be closed, and notwithstanding rule XXII, the Senate proceed to executive session and resume consideration of S. Res. 412, postcloture, and that all postcloture time be expired at 1:30 p.m.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. THUNE. Mr. President, for the information of my colleagues, Senators should expect a series of votes at 1:30 p.m.

ADJOURNMENT UNTIL 11:30 A.M. TOMORROW

Mr. THUNE. Mr. President, if there is no further business to come before the Senate, I ask that it stand adjourned under the previous order.

There being no objection, the Senate, at 2:11 p.m., adjourned until Friday, October 3, 2025, at 11:30 a.m.

NOMINATIONS

Executive nominations received by the Senate:

DEPARTMENT OF LABOR

DANIEL BONHAM, OF OREGON, TO BE AN ASSISTANT SECRETARY OF LABOR, VICE ELIZABETH SCHOFF WATSON, RESIGNED.

DEPARTMENT OF DEFENSE

MARK DITLEVSON, OF MINNESOTA, TO BE AN ASSISTANT SECRETARY OF DEFENSE, VICE MELISSA GRIFFIN DALTON, RESIGNED.

DEPARTMENT OF JUSTICE

PAUL FERGUSON, OF WEST VIRGINIA, TO BE UNITED STATES MARSHAL FOR THE NORTHERN DISTRICT OF WEST VIRGINIA FOR THE TERM OF FOUR YEARS, VICE J.C. RAFFETY, TERM EXPIRED.

CONSUMER PRODUCT SAFETY COMMISSION

WILLIAM HEWES III, OF MISSISSIPPI, TO BE A COMMISSIONER OF THE CONSUMER PRODUCT SAFETY COMMISSION FOR A TERM EXPIRING OCTOBER 26, 2031, VICE DOUGLAS DZIAK, RESIGNED.

DEPARTMENT OF STATE

BENJAMIN LANDA, OF NEW YORK, TO BE AMBASSADOR EXTRAORDINARY AND PLENIPOTENTIARY OF THE UNITED STATES OF AMERICA TO HUNGARY.

DEPARTMENT OF COMMERCE

ARVIND RAMAN, OF INDIANA, TO BE UNDER SECRETARY OF COMMERCE FOR STANDARDS AND TECHNOLOGY, VICE LAURIE E. LOCASCIO, RESIGNED.

DEPARTMENT OF JUSTICE

ROBERT ROTTER, OF IOWA, TO BE UNITED STATES MARSHAL FOR THE NORTHERN DISTRICT OF IOWA FOR THE TERM OF FOUR YEARS, VICE DOUGLAS J. STRIKE, TERM EXPIRED.

DANIEL SATTERLEE, OF SOUTH DAKOTA, TO BE UNITED STATES MARSHAL FOR THE DISTRICT OF SOUTH DAKOTA FOR THE TERM OF FOUR YEARS, VICE DANIEL C. MOSTELLER, TERM EXPIRED.

DAVID ST. PIERRE, OF MAINE, TO BE UNITED STATES MARSHAL FOR THE DISTRICT OF MAINE FOR THE TERM OF FOUR YEARS, VICE THEODOR G. SHORT, TERM EXPIRED.

DEPARTMENT OF STATE

JENNIFER WICKS MCNAMARA, OF VIRGINIA, A CAREER MEMBER OF THE SENIOR FOREIGN SERVICE, CLASS OF MINISTER–COUNSELOR, TO BE AMBASSADOR EXTRAORDINARY AND PLENIPOTENTIARY OF THE UNITED STATES OF AMERICA TO THE SOCIALIST REPUBLIC OF VIETNAM.

IN THE AIR FORCE

THE FOLLOWING NAMED OFFICER FOR APPOINTMENT TO THE GRADE INDICATED IN THE UNITED STATES AIR FORCE UNDER TITLE 10, U.S.C., SECTION 624:

To be major

DUSTIN L. CROWE

IN THE ARMY

THE FOLLOWING NAMED OFFICER FOR APPOINTMENT TO THE GRADE INDICATED IN THE UNITED STATES ARMY UNDER TITLE 10, U.S.C., SECTION 624:

To be major

JAMES B. CARPENTER

THE FOLLOWING NAMED OFFICER FOR APPOINTMENT TO THE GRADE INDICATED IN THE UNITED STATES ARMY UNDER TITLE 10, U.S.C., SECTION 624:

To be major

GARY R. CHAPMAN

IN THE NAVY

THE FOLLOWING NAMED OFFICER FOR APPOINTMENT TO THE GRADE INDICATED IN THE UNITED STATES NAVY UNDER TITLE 10, U.S.C., SECTION 624:

To be captain

PETER G. SEGUIN

WITHDRAWAL

Executive Message transmitted by the President to the Senate on October 2, 2025 withdrawing from further Senate consideration the following nomination:

MARK BRNOVICH, OF ARIZONA, TO BE AMBASSADOR EXTRAORDINARY AND PLENIPOTENTIARY OF THE UNITED STATES OF AMERICA TO THE REPUBLIC OF SERBIA, WHICH WAS SENT TO THE SENATE ON APRIL 29, 2025.