

Colonel Teresa M. Peterson who is leaving the 14th Flying Training Wing (14 FTW) after two years of devoted service to become the Director of Transportation on the Air Force staff in the Pentagon. It is a privilege for me to recognize her many outstanding achievements at Columbus Air Force Base, and to commend her for the superb service she has provided the Air Force and our great Nation.

As Commander of the 14th Flying Training Wing, Colonel Peterson spearheaded the training and education of our Nation's next generation of Air Force pilots. The epitome of an Air Force officer and accomplished pilot, she provided our Nation's future warriors with inspirational leadership and an outstanding training environment. Her talents were showcased in every aspect of Columbus AFB operations and highlighted through outstanding performances on command inspections such as the 1998 Headquarters Air Education and Training Command (AETC) Operational Readiness Inspection.

Colonel Peterson's quality of life initiatives for Columbus AFB provided the installation with \$56 million in improvements. Those initiatives included construction of a \$6.3 million Unaccompanied Officer Quarters and a \$25 million, 202 unit, highly sensitive family housing complex. She deftly negotiated resolution of several complex contracting challenges on the family housing project and ensured that contractor issues were handled quickly and efficiently. Her vision and oversight of numerous facilities construction and renovation projects significantly enhanced the training environment and living conditions of Columbus AFB personnel.

Under Colonel Peterson's leadership and guidance, Columbus AFB was a showcase for visitors which included the Secretary of the Air Force, members of Congress, foreign dignitaries, numerous flag officers, and friends and families of the Specialized Undergraduate Pilot Training Program. Her dedication to the Air Force and her people and the vision she established for Columbus AFB are her greatest assets, netting Columbus unprecedented recognition with AETC and the Air Force.

She aggressively met the increased Air Force pilot demand through activation of the first reserve associate squadron, seamlessly integrating reservists with active duty instructor pilots to mitigate force reduction problems. Colonel Peterson managed the second busiest military airfield east of the Mississippi River, with more than 200,000 aircraft operations annually. Her area of responsibility included 49,000 square miles of airspace in close coordination with 13 civilian satellite airports. Under her command, Columbus AFB has remained one of the safest flying operations in the AETC.

She astutely enhanced pilot training at its initial phase by establishing co-equal T-37 squadrons with an operating concept for synchronized training and

operations under two distinct supervisors. She managed pilot training and support operations for USAF and international officers using a fleet of 247 T-37B, T-38A, T-1A and AT-38B aircraft and 14 instrument simulators. Her extraordinary aviation skills, coupled with her vast experience and boundless warrior spirit, ensured that Columbus AFB was aggressively able to meet the challenge of increased Air Force pilot demand. Her efforts produced 585 Specialized Undergraduate Pilot Training and 481 Introduction to Fighter Fundamental student pilots who flew 146,795 sorties totaling 198,722 hours during her tenure.

As Colonel Teresa Peterson leaves Columbus Air Force Base, she leaves behind a legacy of excellence and "firsts." She was the first woman in the Air Force to command a flying squadron; the first active duty woman to command an Air Force flying wing; and, the first woman pilot to make the rank of brigadier general. She is recognized as an honorary member of the Tuskegee Airmen (Alva N. Temple Chapter) and a member of the Mississippi University for Women's National Board of Distinguished Women. Colonel Peterson is an outstanding officer and a credit to the United States Air Force and our great Nation. I call upon my colleagues from both sides of the aisle to recognize her service to Columbus Air Force Base and wish her well in her next assignment.

VICTIMS OF GUN VIOLENCE

Mr. SCHUMER. Mr. President, it has been more than a year since the Columbine tragedy, but still this Republican Congress refuses to act on sensible gun legislation.

Since Columbine, thousands of Americans have been killed by gunfire. Until we act, Democrats in the Senate will read some of the names of those who lost their lives to gun violence in the past year, and we will continue to do so every day that the Senate is in session.

In the name of those who died, we will continue this fight. Following are the names of some of the people who were killed by gunfire one year ago today.

June 7, 1999: Devron Baker, 17, Baltimore, MD; Allen Galathe, 19, New Orleans, LA; Jose Junco, 27, Houston, TX; Raynell Lawrence, 24, New Orleans, LA; Kenneth Martin, 41, New Orleans, LA; Earl Merriweather, 23, Atlanta, GA; Solomon Morrison, 65, New Orleans, LA; Lawrence Piedra, 39, Philadelphia, PA; Allan P. Raidna, 30, Seattle, WA; Angel Retemar, 19, Bridgeport, CT; Timothy Stovall, 12, New Orleans, LA; Unidentified male, 49, Bellingham, WA.

UNANIMOUS CONSENT REQUEST

Mr. SHELBY. Mr. President, I ask unanimous consent that a letter to Senators LOTT and DASCHLE dated May 21, 2000, be printed in the RECORD.

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

U.S. SENATE,
SELECT COMMITTEE ON INTELLIGENCE,
Washington, DC, May 25, 2000.

HON. TRENT LOTT,
Majority Leader,
Hon. TOM DASCHLE,
Minority Leader, U.S. Senate,
Washington, DC.

SENATOR LOTT AND DASCHLE: S. 1902, the Japanese Imperial Army Disclosure Act, contains provisions affecting intelligence activities and programs. This legislation, which amends the National Security Act of 1947, would permit the release of any portion of any operational file of the Central Intelligence Agency. As you know, these are issues of significant interest to, and clearly within the jurisdiction of, the Select Committee on Intelligence. Therefore, pursuant to Senate Resolution 400, we hereby request that S. 1902 be referred to the Intelligence Committee for consideration.

Sincerely,

RICHARD C. SHELBY,
Chairman.
RICHARD H. BRYAN,
Vice Chairman.

COMMITTEE ON RULES AND ADMINISTRATION RULE CHANGE

Mr. MCCONNELL. Mr. President, I would like to give notice to Members and staff of the Senate that the Committee on Rules and Administration has approved the following change to its Rules of Procedure.

The Committee's rules approved at the beginning of the 106th Congress require 4 members of the committee to constitute a quorum for the purpose of taking testimony under oath and 2 members of the committee to constitute a quorum for the purpose of taking testimony not under oath.

The Committee intends to amend paragraph 3 of Title II of the Rules of Procedure for the Committee on Rules and Administration to state:

3. Pursuant to paragraph 7(a)(2) of rule XXVI of the Standing Rules, 2 members of the committee shall constitute a quorum for the purpose of taking testimony under oath and 1 member of the committee shall constitute a quorum for the purpose of taking testimony not under oath; provided, however, that once a quorum is established for the purpose of taking testimony under oath, any one member can continue to take such testimony.

This amendment shall be effective on June 8, 2000, and will make the Rules Committee's quorum rules more consistent with the quorum rules of most other standing committees.

PENNSYLVANIANS RAISE FUNDS FOR WORLD WAR II MEMORIAL

Mr. SANTORUM. Mr. President, I rise today to recognize the accomplishments of 30,020 Pennsylvanian Wal-Mart associates. These dedicated individuals, along with 870,000 other Wal-Mart associates nationwide, raised more than \$14 million for the National World War II Memorial Campaign.

This outstanding achievement brought the World War II Memorial

Fund to more than \$90 million. This donation brings the fund increasingly closer to its goal of \$100 million. On June 6, 2000, Barbara Ritenour and Bonnie Cowell from Belle Vernon, PA joined 40 other Wal-Mart associates to present this contribution to former Senator Robert Dole, National Chairman of the World War II Memorial Campaign on the National Mall in Washington, D.C.

The purpose of this event on June 6 was to thank those who went above and beyond the call of duty to help meet this financial goal. It was the small contributions of bake sales and parking lot carnivals that made such a difference.

Wal-Mart employs over 1,900 World War II veterans. They recognize the importance of constructing a memorial to salute the men and women who fought in the war as well as those who supported it from the home front.

I commend the efforts of those so dedicated to the memory of those who served in World War II, and I wish the World War II Memorial Campaign continued success as they work to meet the remainder of their \$100 million goal.

RYAN WHITE CARE ACT

Mr. KENNEDY. Mr. President, yesterday we passed the Ryan White CARE Reauthorization Act. I commend everyone in the Senate who has worked so effectively on the issue of HIV and AIDS, beginning with Senator JEFFORDS, who has been a champion on this issue since the CARE Act was first authorized in 1990. I also thank the sponsors of this bill and our colleagues on the Health Committee who have sounded the alarm about the HIV/AIDS crisis through their unwavering support of the CARE Act reauthorization.

There is no stronger or more effective support than a full Senate unanimous vote today to show that, in each and every one of our states, we stand behind a bill that will enable so many citizens to receive the benefits of advances in therapies and support developed through our efforts over the past ten years.

At times of great human suffering or great tragedies or epidemics, it has often been the leadership of the federal government that has helped our fellow citizens deal with difficulties. It is in that very important tradition that this legislation was originally enacted and I urge the Senate to approve this important reauthorization of it today.

Ryan White, the young boy after whom the CARE Act was named, would have celebrated his twenty-eighth birthday this year. If we had we been as far along as we are now in providing life-prolonging and life-saving therapies, Ryan might well have been here with us, thanking each of us for the lifeline and the hope provided through the CARE Act.

Since the beginning of this epidemic, AIDS has claimed over 400,000 lives in

the United States, and an estimated 900,000 Americans are living with HIV/AIDS today. AIDS continues to claim the most vulnerable among us. Like other epidemics before it, Aids is now hitting hardest in areas where knowledge about the disease is scarce and poverty is high. The epidemic has dealt a particularly severe blow to communities of color, which account for 73% of all new HIV infections. Women account for 30% of new infections. Over half of all new infections occur in persons under 25. This means that HIV infection of the nation's youth is a national crisis.

AIDS continues to kill brothers and sisters, children and parents, friends and loved ones—all in the prime of their lives. From the 30,000 AIDS orphans in New York City to the 21 year old gay man with HIV living in Iowa, this epidemic knows no geographic boundaries and has no mercy.

An estimated 34% of AIDS cases in the U.S. are in rural areas, and this percentage is growing. We know the challenges faced in rural communities where pulling together in the face of adversity is commonplace in other case. But where too often today there is silence and isolation because of the fear of condemnation over AIDS.

In addition, access to good medical care is often a significant barrier for many of our citizens with disabling diseases, who have to travel to urban centers to receive the care they need and deserve. As the AIDS crisis continues year after year, it has become more and more difficult for anyone to claim that AIDS is someone else's problem. In a very real way, we are all living with AIDS or are directly touched by AIDS.

The epidemic still kills over 47,000 persons a year. But we have good reason today to feel encouraged by the extraordinary medical advances made over the past ten years. AIDS deaths declined by 20% between 1997 and 1998. Many people with HIV and AIDS are leading longer and healthier lives today.

In addition, we have witnessed the smallest increase in new AIDS cases—11% in 1998, compared to an 18% increase in 1997. More families are leading productive lives in our society, in spite of their HIV diagnosis. This is the good news. But unfortunately, the number of people living with AIDS who can't afford expensive medical treatment is growing which means that greater demands are being placed on community-based organizations and state and local governments that serve them.

The advances in the development of life-saving HIV/AIDS drugs has come with an enormous price tag and these advances have been costly. An estimated 30% of person living with AIDS do not have health care coverage to pay for costly treatments. For these Americans, the CARE Act continues to provide the only means to obtain the health care and the treatment they need.

In Massachusetts we have seen an overall 77% decline in AIDS and HIV-related deaths since 1995. At the same time, however, like many other states, the changing HIV/AIDS trends and profiles are serious problems. AIDS and HIV cases increased in women by 11% from 1997 to 1998. 55% of persons living with AIDS in the state are person of color. State budgets often provide funds for prevention, screening and primary care. But no state could provide the major financial resources needed to help person living with HIV disease to obtain the medical and support services they need, without the Ryan White CARE Act.

By passing this legislation, we are making clear that the AIDS epidemic in the United States will receive the attention and public health response it deserves. The CARE Act reauthorization brings hope to over 600,000 persons each year in dealing with the devastating disease. It also brings hope and help to their families and their communities.

The enactment of this legislation in 1990 was an emergency response to the devastating effects of HIV on individuals, families, communities, and state and local governments. The Act targets funds to respond to the specific needs of specific communities. Title I targets the hardest hit metropolitan areas in the country. Local planning and priority-setting requirements under Title I assure that each of the Eligible Metropolitan Area can respond effectively to the local HIV/AIDS needs.

Title II funds emergency relief to states. It helps them to develop HIV care infrastructure, and to provide effective and life-sustaining drug therapies through the AIDS Drug Assistance Program to over 61,000 persons each month.

Title III funds community health centers and other primary health care providers that serve areas with a significant and disproportionate need for HIV care. Many of these community health centers are located in the hardest hit areas, serving low income communities. Title IV of the CARE Act meets the specific needs of women, children, and families.

This reauthorization builds on these past accomplishments, while recognizing the challenge of ensuring access to HIV drug treatments for all who need them. Our goal is to reduce health disparities in vulnerable communities, and improve the distribution and quality of services. Senator JEFFORDS and I have worked together to address new challenges we face in the battle against AIDS. This reauthorization will create additional funding for states that have had to limit access to new therapies due to lack of resources. The bill also targets new funds to smaller metropolitan areas and to rural and urban communities, where the epidemic is growing and adequate infrastructure is lacking.

In addition, the bill funds early intervention services to promote early diagnosis of HIV disease, referral to health