

Health Centers nationwide provide care to 1 of every 8 uninsured Americans, 1 of every 4 Americans in poverty, and 1 of every 9 rural Americans.

As a former president of the National Community Health Centers organization, I am honored to advocate for the expansion of this tremendously vital segment of our comprehensive healthcare system. By incorporating both H.R. 5544—The Patients and Public Health Partnership Act of 2008 and H.R. 870, which amends the Public Health Service Act to provide liability protections for practitioners of health centers who provide health services in emergency areas into this legislation; H.R. 1343 is now expanded to increase both insured coverage and access to critical resources for these invaluable medical professionals. This legislation empowers community health practitioners to serve on a larger scale and make an even greater positive impact particularly at a time when our health care delivery systems across the board are overburdened. I ask my colleagues to join me in support of H.R. 1343.

Mr. McHUGH. Madam Speaker, I rise today in support of H.R. 1343, the Health Centers Renewal Act of 2007. I am proud to be a cosponsor of this legislation, which would reauthorize the community health centers program through fiscal year 2012.

Community health centers are an integral component of our Nation's health care infrastructure. Nationwide, more than 1,500 such centers provide high-quality, cost-effective primary health care to anyone seeking care. In New York State, health centers provide services to 1.1 million people who receive care at over 425 sites.

Of note, community health center fees are based on income and family size and services are provided regardless of insurance status or ability to pay. Forty-three percent of New York State health center patients are Medicaid beneficiaries and 28 percent are uninsured. Moreover, over 86 percent of New York State health center patients have incomes at or below 200 percent of the Federal poverty level, which in 2008 is \$42,400 for a family of four.

Access to health care is truly one of the most difficult challenges for Americans living in rural areas like northern and central New York. Community health centers have been a tremendous help in our efforts to improve access to health care. I am thankful that my constituents in New York State's 23rd Congressional District are served by four community health centers: Hudson Headwaters Health Network; Northern Oswego County Health Services; The Smith House; and the United Cerebral Palsy Association of the North Country.

I deeply appreciate the dedication and hard work of the staff at those health centers. Indeed, I am hesitant to imagine a scenario in which my constituents did not have the benefit of their excellent services. I also appreciate the efforts of the gentleman from Texas, Mr. GREEN, and the gentleman from Mississippi, Mr. PICKERING, to develop this measure and bring it to the House floor today; I look forward to its enactment.

Mr. GENE GREEN of Texas. Madam Speaker, I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by

the gentleman from Texas (Mr. GENE GREEN) that the House suspend the rules and pass the bill, H.R. 1343, as amended.

The question was taken.

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

Mr. BROUN of Georgia. Madam Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

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

POISON CENTER SUPPORT, ENHANCEMENT, AND AWARENESS ACT OF 2008

Mr. GENE GREEN of Texas. Madam Speaker, I move to suspend the rules and pass the bill (H.R. 5669) to amend the Public Health Service Act to reauthorize the poison center national toll-free number, national media campaign, and grant program to provide assistance for poison prevention, sustain the funding of poison centers, and enhance the public health of people of the United States.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 5669

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

SECTION 1. SHORT TITLE.

This Act may be cited as the "Poison Center Support, Enhancement, and Awareness Act of 2008".

SEC. 2. FINDINGS.

Congress makes the following findings:

(1) Poison centers are the primary defense of the United States against injury and deaths from poisoning. Twenty-four hours a day, the general public as well as health care practitioners contact their local poison centers for help in diagnosing and treating victims of poisoning. In 2007, more than 4 million calls were managed by poison centers providing ready and direct access for all people of the United States, including many underserved populations in the United States, with vital emergency public health information and response.

(2) Poisoning is the second most common form of unintentional death in the United States. In any given year, there will be between 3 million and 5 million poison exposures. Sixty percent of these exposures will involve children under the age of 6 who are exposed to toxins in their home. Poisoning accounts for 285,000 hospitalizations, 1.2 million days of acute hospital care, and more than 26,000 fatalities in 2005.

(3) In 2008, the Harvard Injury Control Research Center reported that poisonings from accidents and unknown circumstances more than tripled in rate since 1990. In 2005, the last year for which data are available, 26,858 people died from accidental or unknown poisonings. This represents an increase of 20,000 since 1990 and an increase of 2,400 between 2004 and 2005. Fatalities from poisoning are increasing in the United States in near epidemic proportions. The funding of programs to reverse this trend is needed now more than ever.

(4) In 2004, The Institute of Medicine, of the National Academies recommended that the

"Congress should amend the current Poison Control Center Enhancement and Awareness Act Amendments of 2003 to provide sufficient funding to support the proposed Poison Prevention and Control System with its national network of poison centers. Support for the core activities at the current level of service is estimated to require more than \$100 million annually."

(5) Sustaining the funding structure and increasing accessibility to poison control centers will promote the utilization of poison control centers and reduce the inappropriate use of emergency medical services and other more costly health care services. The 2004 Institute of Medicine Report to Congress determined that for every \$1 invested in the Nation's poison centers \$7 of health care costs are saved. In 2005, direct Federal health care program savings totaled in excess of \$525 million as the result of poison center public health services.

(6) More than 30 percent of the cost savings and financial benefits of the Nation's network of poison centers are realized annually by Federal health care programs (estimated to be more than \$1 billion), yet Federal funding support (as demonstrated by the annual authorization of \$30.1 million in Public Law 108-194) comprises less than 11 percent of the annual network expenditures of poison centers.

(7) Real-time data collected from the Nation's certified poison centers can be an important source of information for the detection, monitoring, and response for contamination of the air, water, pharmaceutical, or food supply.

(8) In the event of a terrorist event, poison centers will be relied upon as a critical source for accurate medical information and public health emergency response concerning the treatment of patients who have had an exposure to a chemical, radiological, or biological agent.

SEC. 3. REAUTHORIZATION OF POISON CENTERS NATIONAL TOLL-FREE NUMBER.

Section 1271 of the Public Health Service Act (42 U.S.C. 300d-71) is amended to read as follows:

"SEC. 1271. MAINTENANCE OF THE NATIONAL TOLL-FREE NUMBER.

"(a) IN GENERAL.—The Secretary shall provide coordination and assistance to poison centers for the establishment of a nationwide toll-free phone number, and the maintenance of such number, to be used to access such centers.

"(b) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated \$2,000,000 for each of the fiscal years 2000 through 2009 to carry out this section; and \$1,000,000 for each of the fiscal years 2010 through 2014 for the maintenance of the nationwide toll-free phone number under subsection (a)."

SEC. 4. REAUTHORIZATION OF NATIONWIDE MEDIA CAMPAIGN TO PROMOTE POISON CENTER UTILIZATION.

(a) IN GENERAL.—Section 1272 of the Public Health Service Act (42 U.S.C. 300d-72) is amended to read as follows:

"SEC. 1272. NATIONWIDE MEDIA CAMPAIGN TO PROMOTE POISON CENTER UTILIZATION.

"(a) IN GENERAL.—The Secretary shall carry out, and expand upon, a national media campaign to educate the public and health care providers about poison prevention and the availability of poison center resources in local communities and to conduct advertising campaigns concerning the nationwide toll-free number established under section 1271(a).

"(b) CONTRACT WITH ENTITY.—The Secretary may carry out subsection (a) by entering into contracts with a nationally recognized organization in the field of poison

control for the development and implementation of a nationwide poison prevention and poison center awareness campaign, which may include the development and distribution of poison prevention and poison center awareness materials; television, radio, Internet, and newspaper public service announcements; and other means of public and professional awareness and education.

“(c) EVALUATION.—The Secretary shall—

“(1) establish baseline measures and benchmarks to quantitatively evaluate the impact of the nationwide media campaign carried out under this section; and

“(2) prepare and submit to the appropriate congressional committees an evaluation of the nationwide media campaign on an annual basis.

“(d) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to carry out this section \$600,000 for each of the fiscal years 2000 through 2005, such sums as may be necessary for each of the fiscal years 2006 through 2009, and \$1,500,000 for each of the fiscal years 2010 through 2014.”

(b) EFFECTIVE DATE.—The amendment made by this section shall be effective as of the date of the enactment of this Act and shall apply to contracts entered into on or after January 1, 2009.

SEC. 5. REAUTHORIZATION OF THE POISON CENTER GRANT PROGRAM.

(a) IN GENERAL.—Section 1273 of the Public Health Service Act (42 U.S.C. 300d-73) is amended to read as follows:

“SEC. 1273. MAINTENANCE OF THE POISON CENTER GRANT PROGRAM.

“(a) AUTHORIZATION OF GRANT PROGRAM.—The Secretary shall award grants to poison centers certified under subsection (c) (or granted a waiver under subsection (d)) and professional organizations in the field of poison control for the purposes of preventing, and providing treatment recommendations for, poisonings and complying with the operational requirements needed to sustain the certification of the center under subsection (c).

“(b) ADDITIONAL USES OF GRANT FUNDS.—In addition to the purposes described in subsection (a), a poison center or professional organization awarded a grant under such subsection may also use such grant for the following purposes:

“(1) To establish and evaluate best practices in the United States for poison prevention, poison center outreach, and emergency and preparedness programs.

“(2) To research, develop, implement, revise, and communicate standard patient management guidelines for commonly encountered toxic exposures.

“(3) To improve national toxic exposure surveillance by enhancing cooperative activities between poison centers in the United States and the Centers for Disease Control and Prevention.

“(4) To develop, support, and enhance technology and capabilities of professional organizations in the field of poison control to collect national poisoning, toxic occurrence, and related public health data.

“(5) To develop initiatives to foster the enhanced public health utilization of national poison data collected by organizations described in paragraph (4).

“(6) To support and expand the toxicologic expertise within poison centers.

“(7) To improve the capacity of poison centers to answer high volumes of calls and respond during times of national crisis or other public health emergencies.

“(c) CERTIFICATION.—Except as provided under subsection (d), the Secretary may make a grant to a poison center under subsection (a) only if—

“(1) the center has been certified by a professional organization in the field of poison

control, and the Secretary has approved the organization as having in effect standards for certification that reasonably provide for the protection of the public health with respect to poisoning; or

“(2) the center has been certified by a State government, and the Secretary has approved the State government as having in effect standards for certification that reasonably provide for the protection of the public health with respect to poisoning.

“(d) WAIVER OF CERTIFICATION REQUIREMENTS.—

“(1) IN GENERAL.—The Secretary may grant a waiver of the certification requirement of subsection (c) with respect to a noncertified poison center that applies for a grant under this section if such center can reasonably demonstrate that the center will obtain such a certification within a reasonable period of time as determined appropriate by the Secretary.

“(2) RENEWAL.—The Secretary may renew a waiver under paragraph (1).

“(3) LIMITATION.—In no instance may the sum of the number of years for a waiver under paragraph (1) and a renewal under paragraph (2) exceed 5 years. The preceding sentence shall take effect as of the date of the enactment of the Poison Center Support, Enhancement, and Awareness Act of 2008.

“(e) SUPPLEMENT NOT SUPPLANT.—Amounts made available to a poison center under this section shall be used to supplement and not supplant other Federal, State, or local funds provided for such center.

“(f) MAINTENANCE OF EFFORT.—A poison center, in utilizing the proceeds of a grant under this section, shall maintain the expenditures of the center for activities of the center at a level that is not less than the level of expenditures maintained by the center for the fiscal year preceding the fiscal year for which the grant is received.

“(g) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to carry out this section—

“(1) for each of the fiscal years 2000 through 2004, \$25,000,000;

“(2) for each of the fiscal years 2005 through 2009, \$27,500,000; and

“(3) for each of the fiscal years 2010 through 2014, \$35,000,000, of which \$1,500,000 shall be used to award grants for the purpose described in subsection (b)(4).”

(b) EFFECTIVE DATE.—The amendment made by this section shall be effective as of the date of the enactment of this Act and shall apply to grants made on or after January 1, 2009.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Texas (Mr. GENE GREEN) and the gentleman from Nebraska (Mr. TERRY) each will control 20 minutes.

The Chair recognizes the gentleman from Texas.

GENERAL LEAVE

Mr. GENE GREEN of Texas. Madam Speaker, I ask unanimous consent that all Members may have 5 legislative days to revise and extend their remarks and include extraneous material on the bill under consideration.

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

There was no objection.

Mr. GENE GREEN of Texas. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I rise in support of H.R. 5669, the Poison Control Center Enhancement and Awareness Act, a

bill that would provide assistance for poison prevention, sustain the funding of poison centers, and enhance the public health of people in the United States.

Unfortunately, poisoning is a significant problem, and according to Centers for Disease Control and Prevention ranks second only to motor vehicle crashes as a cause of unintentional injury or death. The economic cost of unintentional poisoning is considerable, as poisonings led to \$26 billion in medical expenses.

The bill before us today would reauthorize a poison center national toll free number, a national media campaign to promote the use of poison centers, and a grant program to provide assistance for poison prevention to ensure that unintentional poisonings do not lead to unintentional injuries or death.

I acknowledge my colleague, Congressman EDOLPHUS TOWNS, and urge my colleagues on both sides of the aisle to join me in support of this laudable legislation.

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

□ 1200

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

I would like to thank the Speaker and Mr. GREEN and the committee for bringing this forward in such a timely manner.

This is an important act. This bill reflects a bipartisan effort, strengthened by the leadership of Mr. TOWNS, who provides the necessary funding for the poison control centers to continue their lifesaving work. I must say that in writing this bill, I enjoyed working with Mr. TOWNS and his staff and appreciate all of their help and cooperation.

The poison control center located in Omaha is the designated poison control center for Nebraska, Wyoming, and, amazingly, American Samoa and the Federated States of Micronesia. It is one of the oldest poison control centers in the United States, established in 1957. It's one of fifty-two poison control centers in the United States certified as a regional poison control center by the American Association of Poison Control Centers and operates 24 hours a day, 7 days a week with full information and treatment capabilities. The majority of funding is provided by the Nebraska Med Center, Creighton University Medical Center, and the University of Nebraska.

In 2007, 61 poison control centers located throughout the United States played a critical role in saving lives by responding to 4 million calls. Poison control centers are staffed by medical professionals 24 hours a day, 7 days a week. These professionals are trained with the knowledge needed to assess poison risk, advise treatment and/or triage patients, recommend a treatment, or refer them to appropriate medical facilities.

Poisoning is the second leading form of unintentional death in the United States, and an estimated 60 percent of those exposures are experienced by children under the age of 6. Calls received by poison control centers addressed chemical, biological, and nuclear exposure, as well as adverse reactions to pesticides, cleaning products, and other hazardous products.

This bill provides the funding needed to authorize the poison center national toll-free number, national media campaign, and the State grant program to provide assistance for poison prevention. This legislation not only saves lives but saves millions of dollars a year in preventable medical expenses. A report by the Institute of Medicine concludes that the Nation's poison control centers yielded \$7 in savings for every \$1 invested. In 2005 alone, poison control centers saved Federal health programs an estimated \$525 million.

I encourage my colleagues to examine this bill and join us in support of this bill and the lifesaving work of poison control centers across the country.

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

Mr. GENE GREEN of Texas. Mr. Speaker, I have no further requests for time, and I reserve the balance of my time.

Mr. TERRY. Mr. Speaker, I yield myself such time as I may consume to close.

As I mentioned in my first statement, my opening statement, this is a bipartisan effort. Once again, I want to thank Mr. TOWNS.

I have the floor statement of our ranking member, JOE BARTON, who is also in support of this bill, and I will read in significant part his statement.

He states: "As our primary defense against injury and death from poisoning, poison control centers are a vital part of our health care system in the United States. Few people realize poisoning is the second most common form of unintentional death in the United States. In 2005 there were over 26,000 deaths in the United States caused by the ingestion of poisons that resulted from approximately 5 million incidents of poison exposure. And without question, the number of deaths and debilitating injuries resulting from poisoning would be significantly higher if it weren't for the strong network of poison centers we already have, and with the passage of the legislation before us today, I am confident that we can make a great program even better."

And thanks to all of the efforts from the members of the Energy and Commerce Committee in making this a great bipartisan bill.

Mr. Speaker, with that I yield back the balance of my time.

Mr. GENE GREEN of Texas. Mr. Speaker, I yield myself such time as I may consume.

I would like to thank my colleague, who is also a member of the Energy and Commerce Committee, not only on

this bill but on other health care bills that we're dealing with on a bipartisan basis.

This reauthorization of the poison center national toll-free number and the media campaign has been a proven success. And since all politics is local, and since you mentioned the University of Nebraska, I have to mention the University of Texas Medical Branch that serves as our poison control publicity and facility, and it's very successful. We just need to expand it because we still are having deaths from poisoning, and we need to make sure that toll-free number is utilized and that information is out there for our community.

Ms. CORRINE BROWN of Florida. Mr. Speaker, I rise today in strong support of H.R. 5669. The Poison control centers provide vital healthcare services to Americans of all incomes and keep costs from emergency procedures under control. Through their cost-saving programs, these centers benefit the general public, the government, health care providers, public health entities, and insurers.

In my district, Jay Schauben supervises a poison control center at Shans-Jacksonville hospital that treats a population of approximately six million. The Florida legislature created this center in 1989 to address overwhelming needs in the areas of exposure treatment and education, and Dr. Schauben's team has risen to the challenge and helped a countless number of my constituents. I would also like to thank Senator David Karnes, whose tireless support has been a great help in attaining funding for these important centers. Finally, I would like to thank Dr. Gerold Schiebler of the University of Florida. Dr. Schiebler has been active for decades in the campaign for affordable healthcare and widespread access to poison control services.

With our economy in recession, now is certainly no time to further limit access to the quality healthcare services, or to tie the hands of advocates like Dr. Schauben, Senator Karnes, and Dr. Schiebler. So, it is critically important that poison control centers are reauthorized, and that these centers receive full funding through Fiscal Year 2014.

A wide variety of Americans benefit from the services poison control centers provide every day. The general public benefits by receiving cost-free poisoning prevention guidelines, emergency medical advice, and follow-up calls about treatment. These services prevent trips to emergency rooms and keep already outrageous healthcare costs from rising even further.

I represent one of the poorest districts in the State of Florida, and I have seen first hand the challenges my constituents face in finding affordable healthcare. A study group consisting of medical and poison control experts has found that every dollar spent on poison centers saves seven dollars in healthcare costs.

Also, poison control centers provide educational programs aimed at prevention. These programs help educate many uninsured Americans about means of poison prevention, and keep healthcare costs in the U.S. down by avoiding emergency room procedures.

In addition to saving low- and middle-income Americans healthcare dollars, poison control centers provide 24-hour emergency and informational services via a Toll-Free Na-

tional Hotline. This hotline is a vital source of information for many of my constituents, and Americans across the country, who could not otherwise receive medical advice or attention. This hotline also provides essential follow-up calls regarding continuing care of poison exposures.

Without a national hotline, many individuals with known or suspected toxic exposures would seek significantly more costly and less accessible healthcare alternatives, such as an emergency room visit.

Simply, the benefits of these centers are widespread, but are especially helpful to those whose incomes prohibit access to private health care services. Failure to reauthorize these important centers would represent a tremendous disservice to Americans in all Congressional districts.

I urge my colleagues to support H.R. 5669.

Mr. BARTON of Texas. Mr. Speaker, I rise in support of H.R. 5669, the "Poison Center Support, Enhancement, and Awareness Act of 2008." I would like to thank my friend from New York, Mr. TOWNS, and, my friend from Nebraska, Mr. TERRY, for introducing this important legislation, and I want to thank Chairman DINGELL and Subcommittee Chairman PALLONE for working in a bipartisan manner as we moved this bill through the Energy and Commerce Committee.

As our primary defense against injury and death from poisoning, poison centers are a vital part of our healthcare system in the United States. Few people realize that poisoning is the second most common form of unintentional death in the United States. In 2005, there were over 26,000 deaths in the United States caused by the ingestion of poisons that resulted from approximately 5 million incidents of poison exposure. And without question, the number of deaths and debilitating injuries resulting from poisoning would be significantly higher if it weren't for the strong network of poison centers we already have, and with passage of the legislation before us today, I am confident that we can make a great program even better.

Again, I thank my colleagues for their efforts on this bipartisan bill.

Ms. SCHAKOWSKY. Mr. Speaker, I rise in support of H.R. 5669, the Poison Center Support, Enhancement, and Awareness Act of 2008, and I thank the bill's sponsor, Congressman TOWNS, for his leadership on this issue. I also want to thank Chairman PALLONE and Chairman DINGELL for working to bring this bill before us today.

The poison control centers program has proven to be a very successful program for communities across the country, by providing a national toll-free number for poison emergencies, a national media campaign to promote the use of poison centers, and a poison prevention grant program.

In my district alone, the Illinois Poison Center handled 7,021 cases last year. Statewide, 51 percent of the calls the Illinois Poison Center handled involved children under the age of 5. I just can't imagine what families would do without this tremendous resource. Surely, this legislation which will reauthorize this program through 2014 and increase its total authorization to \$37.5 million annually will be money well spent.

Not only do poison centers save lives, they save time and resources by cost avoidance for patients who are cared for in their homes as

opposed to visiting a hospital and by reducing lengths of stay for patients who are cared for by a poison control center prior to arriving at a hospital.

Again, I thank the bill's sponsor and our Chairmen for their work on this legislation, and I urge my colleagues to give H.R. 5669 their support.

Mr. GENE GREEN of Texas. With that, Mr. Speaker, I yield back the balance of my time.

The SPEAKER pro tempore (Mr. PASITOR). The question is on the motion offered by the gentleman from Texas (Mr. GENE GREEN) that the House suspend the rules and pass the bill, H.R. 5669.

The question was taken.

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

Mr. GENE GREEN of Texas. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

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

LIBRARY OF CONGRESS SOUND RECORDING AND FILM PRESERVATION PROGRAMS REAUTHORIZATION ACT OF 2008

Mr. BRADY of Pennsylvania. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 5893) to reauthorize the sound recording and film preservation programs of the Library of Congress, and for other purposes, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 5893

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

SECTION 1. SHORT TITLE.

This Act may be cited as the "Library of Congress Sound Recording and Film Preservation Programs Reauthorization Act of 2008".

SEC. 2. SOUND RECORDING PRESERVATION PROGRAMS.

(a) NATIONAL RECORDING PRESERVATION BOARD.—

(1) REAUTHORIZATION.—

(A) IN GENERAL.—Section 133 of the National Recording Preservation Act of 2000 (2 U.S.C. 1743) is amended by striking "for each of the first 7 fiscal years beginning on or after the date of the enactment of this Act" and inserting "for the first fiscal year beginning on or after the date of the enactment of this Act and each succeeding fiscal year through fiscal year 2016".

(B) EFFECTIVE DATE.—The amendment made by subparagraph (A) shall take effect as if included in the enactment of the National Recording Preservation Act of 2000.

(2) CRITERIA FOR REMOVAL OF MEMBERS.—Section 122(d)(2) of such Act (2 U.S.C. 1722(d)(2)) is amended to read as follows:

"(2) REMOVAL OF MEMBERS.—The Librarian shall have the authority to remove any member of the Board if the member fails, after receiving proper notification, to attend (or send a designated alternate to attend) a regularly scheduled Board meeting, or if the

member is determined by the Librarian to have substantially failed to fulfill the member's responsibilities as a member of the Board."

(b) NATIONAL RECORDING PRESERVATION FOUNDATION.—

(1) REAUTHORIZATION.—

(A) IN GENERAL.—Section 152411(a) of title 36, United States Code, is amended by striking "for each of the first 7 fiscal years beginning on or after the date of the enactment of this chapter" and inserting "for the first fiscal year beginning on or after the date of the enactment of this chapter and each succeeding fiscal year through fiscal year 2016".

(B) EFFECTIVE DATE.—The amendment made by subparagraph (A) shall take effect as if included in the enactment of the National Recording Preservation Act of 2000.

(2) PERMITTING BOARD MEMBERS TO SERVE MORE THAN 2 TERMS.—Section 152403(b)(4) of such title is amended by striking the second sentence.

(3) PERMITTING BOARD TO DETERMINE LOCATION OF PRINCIPAL OFFICE.—

(A) IN GENERAL.—Section 152406 of such title is amended by striking "District of Columbia" and inserting "District of Columbia or another place as determined by the Board of Directors".

(B) CONFORMING AMENDMENT.—Section 152405(b) of such title is amended by striking "District of Columbia," and inserting "jurisdiction in which the principal office of the corporation is located."

(4) CLARIFICATION OF LIMITATION ON USE OF FUNDS FOR ADMINISTRATIVE EXPENSES.—Section 152411(b) of such title is amended to read as follows:

"(b) LIMITATION RELATED TO ADMINISTRATIVE EXPENSES.—Amounts authorized under this section may not be used by the corporation for management and general or fundraising expenses as reported to the Internal Revenue Service as part of an annual information return required under the Internal Revenue Code of 1986."

SEC. 3. FILM PRESERVATION PROGRAMS.

(a) NATIONAL FILM PRESERVATION BOARD.—

(1) REAUTHORIZATION.—

(A) IN GENERAL.—Section 112 of the National Film Preservation Act of 1996 (2 U.S.C. 179v) is amended by inserting after "the Librarian" the following: "for the first fiscal year beginning on or after the date of the enactment of this Act and each succeeding fiscal year through fiscal year 2016".

(B) CONFORMING AMENDMENT.—Section 113 of such Act (2 U.S.C. 179w) is amended by striking the first sentence.

(C) EFFECTIVE DATE.—The amendments made by this paragraph shall take effect as if included in the enactment of the National Film Preservation Act of 1996.

(2) EXPANDING AUTHORIZED USES OF SEAL.—Section 103(b) of such Act (2 U.S.C. 179m(b)) is amended by adding at the end the following: "The Librarian may authorize the use of the seal by the Library or by others for other limited purposes in order to promote in the National Film Registry when exhibiting, showing, or otherwise disseminating films in the Registry."

(3) UPDATING NAMES OF ORGANIZATIONS REPRESENTED ON BOARD.—Section 104(a)(1) of such Act (2 U.S.C. 179n(a)(1)) is amended—

(A) in subparagraph (E), by striking "Cinema" and inserting "Cinema and Media";

(B) in subparagraph (G), by striking "Department of Film and Television" and inserting "Department of Film, Television, and Digital Media";

(C) in subparagraph (H), by striking "Film and Television" and inserting "Cinema Studies"; and

(D) by amending subparagraph (L) to read as follows:

"(L) Screen Actors Guild."

(b) NATIONAL FILM PRESERVATION FOUNDATION.—

(1) REAUTHORIZATION.—Section 151711(a) of title 36, United States Code, is amended to read as follows: by inserting after the first sentence the following:

"(a) AUTHORIZATION OF APPROPRIATIONS.—

"(1) IN GENERAL.—There are authorized to be appropriated to the Library of Congress amounts necessary to carry out this chapter, not to exceed—

"(A) \$530,000 for each of the fiscal years 2005 through 2009;

"(B) \$750,000 for each of the fiscal years 2010 through 2011; and

"(C) \$1,000,000 for each of the fiscal years 2012 through 2016.

"(2) MATCHING.—The amounts authorized to be appropriated under this subsection are to be made available to the corporation to match any private contributions (whether in currency, services, or property) made to the corporation by private persons and State and local governments."

(2) REPATRIATION OF FILMS FROM FOREIGN ARCHIVES AS PURPOSE OF FOUNDATION.—Section 151702(1) of such title is amended by striking "United States;" and inserting "United States and the repatriation of American films from foreign archives;"

(3) EXTENSION OF DEADLINE FOR FILLING VACANCIES IN MEMBERSHIP OF BOARD OF DIRECTORS.—Section 151703(b)(5) of such title is amended by striking "60 days" and inserting "120 days".

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Pennsylvania (Mr. BRADY) and the gentleman from Michigan (Mr. EHLERS) each will control 20 minutes.

The Chair recognizes the gentleman from Pennsylvania.

GENERAL LEAVE

Mr. BRADY of Pennsylvania. Mr. Speaker, I ask unanimous consent that all Members have 5 legislative days to revise and extend their remarks in the RECORD and to include extraneous matter.

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

There was no objection.

Mr. BRADY of Pennsylvania. Mr. Speaker, I yield myself such time as I may consume.

This bill reauthorizes the Sound Recording and Film Preservation Programs of the Library of Congress through the year 2016.

The National Film Preservation Board was created in 1988 to address the rapid deterioration of important films. The Film Preservation Board is responsible for identifying and preserving films they deem are "culturally, historically, or aesthetically significant." Along with the National Film Preservation Foundation, the Film Preservation Board ensures that all generations from all over the world will be able to view these remarkable films and experience their power and importance firsthand.

The National Recording Preservation Board was created by the National Recording Preservation Act of 2000. There are currently 225 entries in the National Recording Registry, and that number may only continue to grow. From music to historical speeches, the