

truly believe that he knows what is right. Because what General McChrystal, once more, has brought to the President in his resource request was what the President asked him to do.

On two occasions over the last few years, I have been to Afghanistan, both as a Member of Congress and as a Marine. While there, I served alongside and shared experiences with the best that this country has to offer. They are truly the greatest generation. People that have so much opportunity, young men and women, they could go to college, they could pretty much do whatever they wanted to do. Instead, they went and served. I have had the awesome opportunity of serving with them. And they have dutifully undertaken their mission to protect our Nation and the Afghan people. I have also spoken to many civilian leaders and military leaders outside of Afghanistan, and they know what the right thing to do is. Our goals in Afghanistan will become further out of reach. In fact, they become more out of reach every single day that we dally here at home and not give them what they have asked for.

If we significantly reduce our military presence right now, at this critical time, the war in Afghanistan will be lost. Understanding this risk, I sincerely hope that President Obama, as Commander in Chief, will follow the recommendation of his appointed military commander and commit his full support to this important mission.

#### HATE CRIMES LEGISLATION

The SPEAKER pro tempore (Mr. PERRIELLO). Under the Speaker's announced policy of January 6, 2009, the gentleman from Iowa (Mr. KING) is recognized for 60 minutes.

Mr. KING of Iowa. Mr. Speaker, I appreciate being recognized and the opportunity and the privilege to come to the floor and address you here. It is also a bit nostalgic to step in behind DUNCAN HUNTER. I remember many times standing here on the floor of the House debating issues, and a lot of them were national security issues, including our immigration issues, with DUNCAN HUNTER's father. And this transition has been very good to see a young man, a young marine, stand here in the well and speak to you and talk to you about our national security issues from the experience standpoint of a marine who has served in Afghanistan and now one who serves in the United States Congress. I very much appreciate the addition to this Congress that he is.

I lament what we have seen happen today, this activity that this Congress has gone through; the Department of Defense authorization bill that saw at least 144 or so vote against it. Most of those that voted against the authorization bill, including me, support, of course, the Department of Defense and our national security and all of our men and women in uniform and all of

our veterans all the way back to many wars prior to today. The Department of Defense authorization bill was used as a political tool by the left to advance a left-wing agenda that should be appalling to the American people if they understand the motivation of this idea of inserting hate crimes into the Department of Defense authorization bill.

It's a piece of legislation that had passed off the floor of this House a piece of stand-alone legislation. Many of us opposed it. It is activist legislation that sets up and creates sacred cows, people who get special protected status, people who are identified by their alleged, hopefully private, sexual behavior or thoughts. This is a bill that the United States Senate couldn't figure out apparently how to debate on its own and send back over here to the House amended or simply send it to the President. So they polluted the Department of Defense authorization bill with it.

I would be very happy to yield so much time as he may consume to the gentleman from California who I think has an opinion on this matter.

Mr. HUNTER. I thank the gentleman. The liberals in this Congress and in the Senate did a despicable thing today. There is usually one bill in this Congress that gets passed that's non-partisan. It's bipartisan. It's the authorization bill to get our military what it needs. And it has never been so important as it has been during this time of war. This is beans, band-aids, bullets, trucks, armor, and flak jackets. Everything that we need to win these wars in Iraq and Afghanistan is in this authorization bill that was being voted on today. I voted "yes" on it. Many voted "no," and they were in the right as well as I was in the right. And here is why. To attach a hate crimes bill, a thought crimes bill, which is wrong in and of its own, but has nothing to do with the military, nothing whatsoever, but the Democrat Congress knew that we would not vote against the military. That's the hand that they played. So they put one of the worst and most rotten bills that has been passed by this Congress on top. They piggy-backed it on top of our defense authorization bill because who's going to vote against the troops?

That was their slant today. And as a marine and as a congressman, it is one of the most despicable things that I have ever seen done by this body. Some of us voted for it. Some of us voted against it. Each of us voted our own conscience on this, and both votes were right. We do have to get our military what it needs on one hand, but on the other hand, we are not going to be ridden roughshod over by a liberal Congress that thinks that they can attach absolutely despicable bills to important things like the defense authorization bill. That's why voting "no" on this bill today was also the right choice. So I thank the gentleman for his conscientious vote today, and I appreciate it.

Mr. KING of Iowa. Reclaiming my time, I so much appreciate the gentleman from California. I'm looking to this new leadership that's emerged into the new Congress, and DUNCAN HUNTER is one of those people. The statement that he has made, I concur with. I have looked at the Department of Defense authorization bill with hate crimes legislation, which is, in fact, thought crimes legislation, built into it, slipped into it as a, not quite a poison pill, because there were liberals over here today, and I would be happy to yield to any one of them that want to stand up and defend themselves, liberals over here today that maybe for the first time voted for the Department of Defense authorization bill because it had this hate crimes legislation in it, the thought crimes legislation in it. Their radical social agenda in some cases overcame their resistance to supporting our military. And so it was a double-edged sword that was put in here, a rotten sword, the wrong, wrong thing to do.

I looked at it from this perspective: that if we are going to let them put into the Department of Defense a piece of legislation that's so contrary to the rule of law, so abhorrent to equal justice under the law, it turns out to be holding the Department of Defense hostage; it's almost like somebody kidnapped the Department of Defense bill and required that in order to pay off the kidnappers, the ransom note was the hate crimes bill. That's what happened. I don't think anybody is going to stand up and defend that today. They wanted to avoid that debate. They wanted to force a vote. And President Obama, of course, supports the hate crimes legislation. So he will sign the bill, and it will be law in the United States of America. And then we will be asking juries and judges to discern not the act that might be committed that's a crime, but the thought that was in the head of the perpetrator and the victim. And it is not the basis of the law going all the way back to English common law to determine what's in the head of the perpetrator or the victim when a crime is committed because an individual is a sacred life. All life is equal under the law. Whether you're a little-bitty baby or whether you are a senior citizen with a terminal illness, those that value those lives under the law are valued equally.

The father of Senator BOB CASEY of Pennsylvania as a Democrat Governor of Pennsylvania, said this: Human life cannot be measured. It is the measure itself against which all other things are weighed. We measure the life and say that it is the measure itself, and an act committed against a person's life, and it could be murder, it could be assault, it could be rape, it could be a number of different acts actually against a person's property, and now this hates crime legislation for the first time would increase the punishment against someone because the victim may have perceived that they were

of a different sexual orientation. So for the jury or the judge to get into the head of the perpetrator and the victim for the first time and value the victim who might be, because of their sexual orientation or their gender identity, a special protected class of people, different from everybody else, so a crime committed against a self-alleged homosexual would be punished additionally.

If there were, say, two people who were equally victims of a crime, one of them was a self-alleged homosexual, the other one was not, the penalty for the assault on the homosexual would be greater than the penalty for the assault on the person who did not declare their sexuality. Mr. Speaker, that's a principle that we should not cross.

As we debated this issue in the Judiciary Committee, I brought an amendment. Now I will argue that the way the language reads and the definitions of sexual orientation and gender identity are so broad that anyone's proclivity could be included in this, whether they are crimes or whether they are not. So I brought an amendment that would strike out inclusion of special protected status for pedophiles. You would think it should be clear. We should be willing not to protect special protected status for pedophiles. The Democrats on the committee argued against it. And it went on a recorded vote to vote against excluding pedophiles as a special protected class. The result of it, Mr. Speaker, was special protection for pedophiles and all other paraphilias that are listed in the American Psychological Association.

That came to the floor of the House of Representatives. We had a debate on it here. The gentlelady from Wisconsin (Ms. BALDWIN) had a definition. She said it only includes heterosexuals or homosexuals. That was her language in the committee. That would not include then, of course, bisexuals. I think that might be trouble for her analysis. But ALCEE HASTINGS, the gentleman from Florida, stood over at that microphone, and he read a list of about 30, I will call them paraphilias. And he said this language protects all of these behaviors, I believe all phillias whatsoever, are protected. ALCEE HASTINGS. I couldn't believe it, Mr. Speaker.

□ 1830

I couldn't believe it, Mr. Speaker. So after the debate was over, the vote was over, I went over and I personally asked him, Did you really say what you said? Did I hear you right? Did I miss a word? Somehow is there a misunderstanding on my part?

He said, No, that's what I believe.

That's what is in the CONGRESSIONAL RECORD. It is in the CONGRESSIONAL RECORD in the Judiciary Committee. It is in the CONGRESSIONAL RECORD on the full record on the floor of the House of Representatives, in the debate and the effort to offer amendments that would exclude these behaviors. And some of these, many of these behaviors are crimes. Hate crimes legislation pro-

fects some acts that are criminal because they are under this list of paraphilias that are part of the sexual orientation or gender identity of the alleged victims or maybe even the perpetrators.

It is a horrible piece of legislation. It addresses crimes of violence, which means an offense that has an element that threatens the use of force against property of another that might be the property of someone with a particular sexual orientation or gender identity.

This is bad law. It is bad legislation. It is a bad, bad precedent for a country that has built its strength upon the rule of law, Mr. Speaker, and now this pill has been slipped into the Department of Defense authorization bill. And there were dozens and dozens of Members of this Congress that voted "no" on the bill exclusively because of the hates crimes legislation, the thought crimes legislation that was injected into it. And they will be characterized now in campaign ads as being against our national defense.

We know, and the totality of the record of the Members of Congress here is understood, but it was a raw political move, and it was a bitter thing to see happen.

I am not worried myself; I will speak up, Mr. Speaker, so I am not worried myself.

I do have a couple of other subjects that I want to shift to.

Mr. Speaker, I am shifting over to the health care debate. This is the chart of HillaryCare. This legislation emerged in 1993. At the time President Bill Clinton gave a speech on the floor here of the House, September 22, 1993. He laid out the principles for a national health care act, for a complete government takeover of all of the health insurance and the health care delivery system in the United States.

This is the flowchart that came from that legislation. I will at least give him credit for honesty. And I will give he and Hillary credit for at least writing a bill. Some of us were nervous that a lot of it happened behind closed doors. But they did write a bill, and they tried to push it on Americas, and Americans rejected the National Health Care Act in 1993 and 1994.

This is the flowchart that comes off of The New York Times that was published at the time. Black and white, a little fuzzy. They didn't have the graphics that we have now. They didn't have color in their newspapers like we do now. But I do have the chart that we have for the new bill now.

This, Mr. Speaker, is the new chart. The black and white that is on this new chart for H.R. 3200, the black and white are existing programs. The color are the new programs that are created by H.R. 3200. So you can see some of the things that exist. Let's see, the Office of Minority Health exists. The Office of Civil Rights exists. The National Coordinator For Health Information Technology exists. But the new ones in color are created by the bill.

There are a lot of them, and I can bog us all down in this, but I will take you down to the part of the bill that gives me the most heartburn. And there is no cure offered for my heartburn if this bill should pass. We have private insurers in America. This black-and-white box here, that represents 1,300 private insurance companies in the United States of America. It is a lot of companies, a lot of competition; 1,300 private health insurance companies.

They are offering in the area, the best estimates we have, about 100,000 different policy variations. That is this box here, traditional health insurance plans.

The private insurers and all of their plans in this box, under the bill they would have to qualify in order to be qualified health benefits plans. That is this purple circle here. It looks rather benign, but it is not benign. Getting qualified for all of these 100,000 policies with the 1,300 companies into these qualified health benefits plans will be done so by the rules of the bill, and the rules are written by the Health Choices Administration and the commission and the commissioner.

This would be one of the most powerful positions in government, the health choices commissioner. And you're wondering why are they not calling him a czar?

Mr. Speaker, that is because we are full up to here with czars. I am going to call him the commi-czar-issioner, the person who would be writing the rules, with his huge staff, and he would make the determination which, if any, of these 100,000 health insurance policies would qualify to go into the purple circle of the qualified health benefits plans.

While those decisions are being made by the health choices commi-czar-issioner, we would also be creating under the bill a public health plan. That's the public option. That is the public option that—I believe today Speaker PELOSI said there are the votes to pass a public option plan here in the House of Representatives. If that is the case, I don't know why she is waiting. They will lose some Members I am convinced of that, Mr. Speaker, but the health choices commissioner will be writing rules that have to be met in order for the private carriers to qualify, all the while they are looking at setting up the Federal health insurance plan that will take billions of dollars of capital to get it established, and they will write their plans with certain restrictions and with certain premiums designed to compete with the private sector.

Remember, the President said we have to provide some competition. We don't have enough competition in the health insurance industry.

I would suspect that he couldn't answer the question how many companies do we have today? How many policy options do we have today? Mr. Speaker, I have just told you, 1,300 companies, 100,000 policy options, and the President's argument is we have to provide

a little more competition so there is a little more variety. The government can do that because health insurance companies aren't doing that job?

What would happen would be billions of dollars would go in to create this new Federal health insurance plan. And then if it couldn't compete with the private sector, the rules would be written differently for these private plans. Many of them wouldn't qualify. They would set mandates and require that policies cover a whole series of things. What about pregnancy for someone who is a grandmother? If everybody has to pay for those kinds of things, the premiums will go up. Those are the kind of mandates that make health insurance premiums go high.

The government would write the rules so they can compete with the private sector is what would happen, and they would tap into the pockets of the taxpayers in order to have the capital to jump-start the health insurance plan. And then as they move forward, regulating private insurance companies and subsidizing the public option, the government plan, the Democrats' health insurance plan, it would squeeze out the private plans.

Now, how can I say that this is what would happen with some confidence? None of us have a crystal ball. But I have a little bit of history, and I take you back to 1968 when, at the time, the only flood insurance in America was provided in the private market by the property and casualty companies.

In 1968, this Congress passed the Federal flood insurance program. When that program was passed, in order to compete, they started to write regulations. The regulations that they wrote in part were requiring national banks who gave loans for real estate to require that those policies, the Federal flood insurance policies, be purchased by the borrower. So there was a mandate that people had to buy flood insurance. They wrote the rules, the premiums and regulations.

And today, since 1968 when there was no Federal flood insurance program and all flood insurance was private on that day when they came to the House in 1968, today a person in America cannot buy a flood insurance policy from anyone except the Federal Government. The only thing left is Federal flood insurance. There are no private carriers out there. The Federal Government has swallowed up the entire private flood insurance industry.

That is an example of what might happen with the health insurance industry, and what I think is likely to happen with the health insurance industry.

In examining some of the policies around the world, I would point out that in Germany they tell us they have the oldest national health care plan in Germany, that they have provided health care for their people since Otto von Bismarck's time. I don't know whether they tell us that or I recall reading that from history. Ninety per-

cent of the health insurance in Germany is the public option; 10 percent is the private option. The people that buy insurance outside of the government insurance plan are those that are entrepreneurs, self-employed, more well-to-do. They want a policy that gives them a little extra coverage and takes a little better care of their health. At least that exists; 90 to 1.

Really, this is something that is the President's plan? He would like to have this public health plan swallow up 90 percent of the private health insurance in America? I think so. He is on record saying he wants a single-payer plan.

When you think about how that goes, a single-payer plan, and if we provided, let's say, funding to buy insurance, to help people buy insurance that couldn't afford it, and that would perhaps be a voucher that goes in, that one can control to buy health insurance, the argument then becomes: How big should that voucher be? Let's just say poor people would get \$3,500, and the more wealthy they were, the less money they would get. And if that were ever established, the next argument is: Where is the threshold? What is the means testing?

Pretty soon the number would go from \$3,500 to \$7,500 to a \$10,000 subsidy for people's health insurance premiums. And then at a certain point, I will hear the argument from over here, if we are still around on that day, we will hear the argument, well, it costs too much money to administer vouchers and to give refundable tax credits to people so they can afford to buy health insurance, why don't we wipe out that whole bureaucratic mess and simply have people show up at the public clinic and we will take care of them accordingly, and their medical records can be managed by the government along with their health care.

I can give you some examples of what happens when you end up with a National Health Care Act, Mr. Speaker. That would be the average time waiting for a knee replacement in Canada: 340 days. The average time waiting for a hip replacement in Canada: 196 days.

I talked to an individual, ran into him at a home improvement type of store. He is a legal immigrant from Germany. He told me he had a hip replacement. He waited in line for at least 6 months for a hip replacement. Finally, he was put in several lines around Europe. He went from Germany to Italy, where they gave him a hip replacement. That was one of the ways he could move more to the front of the line.

We had an individual that made a presentation to us. He was a doctor from Michigan who practiced both in Michigan and in Canada. When he first went to Canada to work the ER, a young man came in with a torn meniscus and some ligament damage. The doctor looked at it and said, You need surgery right away. I will schedule you for tomorrow morning. He was used to working in the United States.

Little did he know, and he found out quickly, he couldn't schedule him for surgery in Canada for the following morning. He couldn't even schedule him for an examination. The specialists that approve the surgery had to be scheduled first. So this young man, with his knee torn up, waited for 6 months for the specialist to examine the knee and approve surgery, which was scheduled another 6 months later.

So the reconstructive surgery for this young man who was incapacitated, couldn't work, was 6 months for the exam, 6 months to get the surgery scheduled, and then all of the rehab that it takes after the muscles atrophy over a 12-month period of time. A full year from the injury where, this doctor, who has good credentials and has spoken to this Congress and I find to be a very credible individual, in the United States that surgery would have taken place the next day, in Canada, it took place 365 days later. We don't need this kind of health care in America. The argument that we have too many uninsured is something that we just simply need to address with some facts.

□ 1845

I know it's hard on the people on the other side when they have to deal with facts. When the President says that we have too many uninsured, and the arguments that you have constantly made that there are 44 to 47 million uninsured. Sometimes you round it up to 50 million, but 47 million is the largest legitimate number that we hear that are uninsured in America.

Somehow they have gone past the idea—first, they want to establish the idea that everybody has a right to health care. Well, that's not in the Constitution. We can make your argument as to this right to health care. Out of the compassion of the American people, we can decide that we don't want to leave anyone behind, and we can decide that we want to make sure that everyone has access to health care. In fact, everybody in America has access to health care. That question is answered.

The only argument that remains is that there are too many that are uninsured, 47 million. So here are the enlightenment facts, Mr. Speaker: 84 percent of the people in the United States have a health insurance policy. In fact, they're happy with it. They don't want it changed. They don't want to lose it. This is the pie chart. All of the people here in blue are insured, and almost all of them are happy about the insurance that they have.

All of these little slices here, these are the 47 million people who are uninsured, and they go down through these categories. I'm going to go from right to left—yellow, black, orange from the bottom. Illegal immigrants, 2 percent. That's part of that 47 million. I don't want to give them insurance off the back of the taxpayers, especially if we're borrowing the money from our

grandchildren and the Chinese. Then we have legal immigrants.

This is a slice in black. They are the ones that are, by law, barred for 5 years from being able to access public benefits. You come into the United States, you should be able to take care of yourself. That's one of the standards. That's another 5 million people, 5.2 million illegals, 5 million legals. Then you have individuals who are earning more than \$75,000 a year. That's the list up here in orange. That number is a number that presumably, if you're making more than \$75,000 a year, you can write a check for a health insurance policy. So they do have an affordable option. They just aren't exercising the option.

Then in green, those eligible for government programs. That's 9.7 million. That is these people here, 3 percent. They're eligible most generally for Medicaid, but they don't sign up. But they're on the list, 9.7 million. We're adding up to 47 million as we go. Here are those that have coverage eligible under their employer. That's around 6 million people. These folks opted out or didn't opt in to their employer-provided health coverage, health insurance coverage.

So all of these lists that we have, from illegal immigrants to new immigrants, \$75,000 or more and could buy their own insurance, those who are eligible for government programs and don't sign up, those who are eligible for employer programs and don't sign up—all of that, you subtract that from 47 million and, Mr. Speaker, you come up with a number that is 12.1 million Americans who don't have health insurance and don't have affordable options.

I have another little chart that shows this. This is the breakdown of this group here. This spectrum from yellow to—well, red or orange has been put now on a chart. This is 47 million. Here is how we show this. These are the different categories that I said: illegals, legals, those that are eligible for Medicaid, those eligible under employers, and that full list. But here in orange, 12.1 million people, less than 4 percent of the population of the United States, and we're going to change here in the House of Representatives, working with the Senate and with the effort of the President and likely his signature for less than 4 percent of the population?

Let me look at this. This sliver right here, that's 12.1 million Americans, this piece, and that's less than 4 percent of the population of the United States. The President's proposal and the liberals' and the Progressives' proposal, the Democrats' proposal is to transform 100 percent of the health insurance industry in the United States and 100 percent of the health care delivery system in the United States to try to reduce this 12.1 million number down to something less than that, maybe something less than 6 million, but certainly not down to zero.

The President stood here and tried to tell us that the proposal would not fund illegals, but his Democrats have voted down the amendments in Energy and Commerce and in Ways and Means that would have required proof of citizenship in order to access these benefits that are written into H.R. 3200, the bill. So it's pretty hard for the President to be critical of those who make allegations about his veracity when the facts show otherwise, Mr. Speaker.

I hope that that dances along the edge of the rules adequately and still carries forth the message. I'm trusting the American people to be intelligent, well informed, objective, not selfish and be able to self-sacrifice, to reach out and help others, but remember to preserve our freedoms. If we sacrifice our freedoms, if we throw over the side that vitality that makes us great, the dependency takes away our vitality. Urgency and need add to our vitality.

Free market capitalism has been a driving force in this country. Yet to date, according to *The Wall Street Journal*, a third of our private sector has been nationalized within the last year. A third of it. When you add three large investment banks that are nationalized, AIG, the large insurance company, Fannie Mae, Freddie Mac, General Motors, Chrysler, eight large huge entities swallowed up and nationalized, which means the Federal Government controls them. That's a third of our private sector, and this health care industry here is between another 14.5 percent and 17.5 percent of our GDP. The range is somewhere between the two.

But if you add those numbers up to what's already been nationalized, you are up to over half of the private sector of the United States. We need to remember that going to Western Europe and looking for ideas and seeking to conform to the ideas that are driven in Western Europe diminish our freedoms. They don't enhance our freedoms. We are a unique people. There is something unique about being an American. We aren't simply an extension of Europe. We are our own people. We're free people that came here to live free or die. I love the motto of New Hampshire: "Live free or die." That has been the case for hundreds of years here in the United States.

We've skimmed the cream off the donor crop from every civilization that sent us people. It was hard to get here. The people that had a dream got here. When they came here, they built on their dreams. They built on our dreams because we have freedom. We have got to expand our freedom, not diminish it. We shouldn't be expanding our government. Now we have got to shrink our government. We have got to find a way to have a private sector that can have the kind of growth necessary to ever pay off this national debt and save people their freedom so that they're not underneath the thumb of a national health care act.

With that, Mr. Speaker, I appreciate your indulgence, and I yield back the balance of my time.

#### SPECIAL ORDERS GRANTED

By unanimous consent, permission to address the House, following the legislative program and any special orders heretofore entered, was granted to:

(The following Members (at the request of Mr. MCDERMOTT) to revise and extend their remarks and include extraneous material:)

Ms. WOOLSEY, for 5 minutes, today.  
Mr. MCDERMOTT, for 5 minutes, today.

Mr. DEFAZIO, for 5 minutes, today.  
Ms. KAPTUR, for 5 minutes, today.  
Mr. GRAYSON, for 5 minutes, today.  
Mr. SCHIFF, for 5 minutes, today.

(The following Members (at the request of Mr. JONES) to revise and extend their remarks and include extraneous material:)

Mr. POE of Texas, for 5 minutes, October 15.

Mr. BURTON of Indiana, for 5 minutes, October 13, 14 and 15.

Mr. JONES, for 5 minutes, October 15.

Mr. MCCOTTER, for 5 minutes, today.

Mr. BISHOP of Utah, for 5 minutes, today.

Mr. CAO, for 5 minutes, today.

Mrs. BACHMANN, for 5 minutes, today.

#### SENATE BILL REFERRED

A bill of the Senate of the following title was taken from the Speaker's table and, under the rule, referred as follows:

S. 942. An act to prevent abuse of Government charge cards; to the Committee on Oversight and Government Reform; in addition to the Committee on Armed Services for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned.

#### ADJOURNMENT

Mr. KING of Iowa. Mr. Speaker, I move that the House do now adjourn.

The motion was agreed to; accordingly (at 6 o'clock and 53 minutes p.m.), under its previous order, the House adjourned until tomorrow, Friday, October 9, 2009, at 10 a.m.

#### EXECUTIVE COMMUNICATIONS, ETC.

Under clause 2 of Rule XXIV, executive communications were taken from the Speaker's table and referred as follows:

4033. A letter from the Assistant to the Board, Board of Governors of the Federal Reserve System, transmitting the System's final rule — Reimbursement for Providing Financial Records; Recordkeeping Requirements for Certain Financial Records [Regulation S; Docket No. R-1325] received September 28, 2009, pursuant to 5 U.S.C. 801(a)(1)(A); to the Committee on Financial Services.

4034. A letter from the Director, Environmental Protection Agency, transmitting Interim Guidance: Providing Communities