

new tax or entitlement legislation. Creating a new non-emergency tax cut or entitlement expansion would require offsetting revenue increases or spending reductions.

In the 1990s, statutory PAYGO encouraged the tough choices that helped to move the Government from large deficits to surpluses, and I believe it can do the same today. Both houses of Congress have already taken an important step toward righting our fiscal course by adopting congressional rules incorporating the PAYGO principle. But we can strengthen enforcement and redouble our commitment by enacting PAYGO into law.

Both the Budget I have proposed and the Budget Resolution approved by the Congress would cut the deficit in half by the end of my first term, while laying a new foundation for sustained and widely shared economic growth through key investments in health, education, and clean energy. Enacting statutory PAYGO would complement these efforts and represent an important step toward strengthening our budget process, cutting deficits, and reducing national debt. Ultimately, however, we will have to do even more to restore fiscal sustainability.

I urge the prompt and favorable consideration of this proposal.

BARACK OBAMA,  
THE WHITE HOUSE, June 9, 2009.

#### SPECIAL ORDERS

The SPEAKER pro tempore. Under the Speaker's announced policy of January 6, 2009, and under a previous order of the House, the following Members will be recognized for 5 minutes each.

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from California (Ms. WOOLSEY) is recognized for 5 minutes.

(Ms. WOOLSEY addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

#### AIR FORCE LIEUTENANT COLONEL MARK E. STRATTON, II

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Texas (Mr. POE) is recognized for 5 minutes.

Mr. POE of Texas. Mr. Speaker, noble sacrifice dominates the character of a man who so willingly dedicates his life for others. There are none who understand that any better today than the men and women in our U.S. military. They personify the very essence of what it means to be an American.

Today, under the morning sky at Arlington Cemetery, myself and other Members of Congress—ROB WITTMAN from Virginia, JO BONNER from Alabama, and Senator SESSIONS from Alabama—joined several hundred other family members and friends as a 21-gun salute and “Taps” was played for United States Air Force Lieutenant

Colonel Mark E. Stratton, II. The somber silence of the grave sites was broken with this tribute.

Colonel Stratton trained as a navigator on an Air Force KC-135. In his honor, one of these massive aircraft flew low and slow over Arlington Cemetery, over the flag-draped coffin of one of Air Force's finest. He gave his life helping the Afghan people to know dignity of a life lived in freedom.

He was assigned to the Joint Staff at the Pentagon here in Washington, D.C. and he served as the commander of the Panjshir Provincial Reconstruction Team in Afghanistan. On May 26, 2009, Mark died near Bagram Airfield of wounds that he sustained from an improvised explosive device, what we call an IED.

Mark had strong Texas ties. He graduated from Texas A&M University in December of 1991 with a degree in political science. And while at Texas A&M, he was a member of Squadron 1 in the Corps of Cadets. He received his commission through the Reserve Officer Training Corps in 1992. He has numerous Air Force commendations, including the Purple Heart and the Bronze Star.

He is remembered by friends as a man of unquestionable character and loyalty. He was a patriotic individual who exemplified the spirit of the American airman.

Lieutenant Colonel Gil Delgado, Mark's former roommate at Texas A&M, described Mark as a man who passionately loved God, his family, his friends and his country, and it showed in everything Mark did.

Through his heroic work in Afghanistan, Mark lived a life helping other people. His time was spent building roads and clinics, schools and canals for the Afghan people. He was an ambassador for the American spirit. He described the job to family and friends as the best he had ever had in his entire career. When he was killed, Mr. Speaker, the villagers in Afghanistan had a memorial service in his honor.

Mark held a deep sense of tradition. Just a few weeks prior to his death, Mark made a special effort to share his Texas Aggie spirit with the Afghan friends that he had met. Mr. Speaker, each April 21, the day Texas gained independence, Aggies from Texas A&M observed what is called Aggie Muster. This occasion is where all Aggies gather in all parts of the world to honor Aggies who have died the previous year.

Even though Mark was the only Aggie within 100 miles of his forward operating base, he convinced the Panjshir Provincial Governor and his security detail to join him atop a nearby mountain to observe the very special occasion of Aggie Muster. One Aggie Air Force colonel and Afghan villagers paid tribute to Americans who died the previous year; that must have been a sight to see.

Texas Aggies have a long tradition of military service. In fact, during World

War II, Texas A&M produced over 14,000 officers, more than came from West Point or Annapolis combined. Mark was a proud Texas Aggie.

Mark is survived by his wife, Jennifer, and their three children, along with his mother, stepfather, and his brother, Michael. Mark's late father and namesake served as an Army captain in the Vietnam War. His stepmother, Debby Young, lives in southwest Houston. Mark's brother, Michael, and stepbrother, Steven, also live in the Houston area.

A great testament to Mark's life is the lives he forever changed through his work; every structure, every canal and road well traveled. Every school Mark helped build will offer generations of Afghan children the opportunity that comes from education. Every clinic he helped build will be a place where sickness will be cured, where human suffering is relieved, and where lives are being saved every day.

Mark has left a noble legacy as he has come to the end of this Earthly journey. It is for others now to pick up the torch he used to light a way for the Afghan people in the rugged mountains and deserts of this remote nation.

Mr. Speaker, it has been said, “The legacy of heroes is the memory of a great name and the inheritance of a great example.” Next year, on April 21, at Aggie Muster, Lieutenant Colonel Mark Stratton's name will be called. His name and life will be remembered by Aggies and other grateful Americans and by his Air Force buddies. But no doubt the people of Afghanistan will also remember the man from America, the Air Force colonel who built their schools, their water wells, and their villages. And maybe those villagers will return once more to that mountaintop and pay tribute to this American hero, Lieutenant Colonel Mark Stratton.

And that's just the way it is.

#### EQUAL RIGHTS FOR HEALTH CARE ACT—TITLE 42

The SPEAKER pro tempore. Under a previous order of the House, the gentlewoman from California (Ms. RICHARDSON) is recognized for 5 minutes.

Ms. RICHARDSON. Mr. Speaker, I rise today to introduce H.R. 2744, the Equal Rights for Health Care Act—Title 42. The concept of equal rights is a pillar of our Nation and the reason why so many immigrate here to the United States.

Indeed, the U.S. was founded on the principle that all Americans should have the inalienable rights of life, liberty, and the pursuit of happiness. In order to enjoy this blessing of life and liberty, however, one must be healthy, and that means they have the benefit of equal treatment and research.

For example, men and women have different symptoms when it comes to heart disease. Unlike men, most women do not experience chest pain. Instead, 71 percent of the women report

having flu-like symptoms, and patients, doctors, and researchers need to make sure that emergency attendants, tests, and prescription drugs are informed about the differences that we might have.

H.R. 2744, the Equal Rights for Health Care Act—Title 42, will prohibit discrimination in health care services and research programs that receive Federal funding based upon sex, race, color, national origin, sexual orientation, gender identity, or disability status.

Civil rights laws have historically been a powerful mechanism for effecting necessary change in the United States. Each law represents a national commitment to end discrimination and to establish a mandate to bring the excluded into the mainstream. These equal rights laws ensure that the Federal Government delivers on the Constitution's promise of equal opportunities so that every individual has the right to develop his or her talents. Health care should be no exception.

In 1971, only 18 percent of women, compared to 26 percent of men, had completed 4 years or more of college. In 1972, the title IX amendment was introduced by Representatives Edith Green of Oregon and Patsy Mink of Hawaii. In 1980, I attended the University of California, Santa Barbara, where I played on the women's basketball team. I witnessed firsthand that there was a difference between playing on the women's team and the men's team. For example, for women, we had to travel in two or three vans to go to all of our away games, where the men were allowed to fly on a plane. You might say why is that something that was important? Well, we lost instruction time, we had time in general lost, preparation was lost, and recuperation was lost. That's why title IX was so important.

In 2007, we celebrated the 35th anniversary of title IX, which assured the women's right to education equality. And the U.S. Department of Education showed that 56 percent of all women, compared to 44 percent of men, now have achieved 4 years or more of college. So title IX has been working.

Federal law prohibits discrimination across a wide array of public policy arenas, none more than when you consider the difference between voting, public education, and now what we should do in health care.

H.R. 2744, the Equal Rights for Health Care Act—Title 42, seeks to have the same effect on the health care community. Despite access to health care, patients are not always in geographic proximity to medical facilities that can provide the consistent care that is needed.

According to the Centers for Disease Control and Prevention, the age-adjusted death rate for all cancers for African Americans in 2001 was 20 percent higher than Caucasian Americans. In 2002, the percentage of Hispanics and Latinos who were 65 years or older and

received adult immunization shots was only 47 percent, as compared to 70 percent for Caucasians.

In 2000, the infant mortality rate among Native Hawaiians was 60 percent higher than Caucasians.

□ 2000

And the rate of leg amputations as a result of diabetes is four times greater of African Americans who receive Medicare than their counterparts, Caucasians.

A list of disparities can go on and on, and so we must put an end to this inequality. Therefore, I have introduced H.R. 2744 so that Congress can take another step towards equal rights, and I look forward to my colleagues on both sides of the aisle joining me.

I'm proud to have a long list of diverse organizations that are supporting this legislation, groups such as the Family Equality Council, the Families United States of America, and, lastly, the National Minority Quality Forum.

I urge all my colleagues to support this legislation that ensures that equal services once and for all will also extend to health care as well, from diagnosis to treatment, and it's a part of the fast-growing health care debate. It's important that a statement of beliefs is made when we reform health care. Equality must be a founding principle, and we must insist that as health care debates move forward, we take the time to ensure that all Americans have the same rights. Let's move forward on title XLII as we did in title IX.

The SPEAKER pro tempore (Mrs. HALVORSON). Under a previous order of the House, the gentleman from North Carolina (Mr. JONES) is recognized for 5 minutes.

(Mr. JONES addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Ohio (Ms. KAPTUR) is recognized for 5 minutes.

(Ms. KAPTUR addressed the House. Her remarks will appear hereafter in the Extensions of Remarks.)

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Texas (Mr. PAUL) is recognized for 5 minutes.

(Mr. PAUL addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

#### PUBLICATION OF THE RULES OF THE COMMITTEE ON STANDARDS OF OFFICIAL CONDUCT 111TH CONGRESS

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from California (Ms. ZOE LOFGREN) is recognized for 5 minutes.

Ms. ZOE LOFGREN of California. Madam Speaker, I submit for publication the at-

tached copy of the Rules of the Committee on Standards of Official Conduct for the U.S. House of Representatives for the 111th Congress. The Committee on Standards of Official Conduct originally adopted these rules pursuant to House Rule XI, clause 2(a)(1) on February 10, 2009, and made revisions to conform with House rules pertaining to the Office of Congressional Ethics on June 9, 2009. I am submitting these rules for publication in compliance with House Rule XI, clause 2(a)(2).

RULES, COMMITTEE ON STANDARDS OF OFFICIAL CONDUCT, ADOPTED FEBRUARY 10, 2009, AMENDED JUNE 9, 2009, 111TH CONGRESS

#### FOREWORD

The Committee on Standards of Official Conduct is unique in the House of Representatives. Consistent with the duty to carry out its advisory and enforcement responsibilities in an impartial manner, the Committee is the only standing committee of the House of Representatives the membership of which is divided evenly by party. These rules are intended to provide a fair procedural framework for the conduct of the Committee's activities and to help ensure that the Committee serves well the people of the United States, the House of Representatives, and the Members, officers, and employees of the House of Representatives.

#### PART I—GENERAL COMMITTEE RULES

##### RULE 1. GENERAL PROVISIONS

(a) So far as applicable, these rules and the Rules of the House of Representatives shall be the rules of the Committee and any subcommittee. The Committee adopts these rules under the authority of clause 2(a)(1) of Rule XI of the Rules of the House of Representatives, 111th Congress.

(b) The rules of the Committee may be modified, amended, or repealed by a vote of a majority of the Committee.

(c) When the interests of justice so require, the Committee, by a majority vote of its members, may adopt any special procedures, not inconsistent with these rules, deemed necessary to resolve a particular matter before it. Copies of such special procedures shall be furnished to all parties in the matter.

(d) The Chair and Ranking Minority Member shall have access to such information that they request as necessary to conduct Committee business.

##### RULE 2. DEFINITIONS

(a) "Committee" means the Committee on Standards of Official Conduct.

(b) "Complaint" means a written allegation of improper conduct against a Member, officer, or employee of the House of Representatives filed with the Committee with the intent to initiate an inquiry.

(c) "Inquiry" means an investigation by an investigative subcommittee into allegations against a Member, officer, or employee of the House of Representatives.

(d) "Investigate," "Investigating," and/or "Investigation" mean review of the conduct of a Member, officer or employee of the House of Representatives that is conducted or authorized by the Committee, an investigative subcommittee, or the Chair and Ranking Minority Member of the Committee.

(e) "Board" means the Board of the Office of Congressional Ethics.

(f) "Referral" means a report sent to the Committee from the Board pursuant to House Rules and all applicable House Resolutions regarding the conduct of a House Member, officer or employee, including any accompanying findings or other supporting documentation.

(g) "Investigative Subcommittee" means a subcommittee designated pursuant to Rule