

and allow them to leverage the economies of scale of the Federal Government's buying power. By saving these important organizations money, more money can be put directly towards helping people.

All the disaster relief groups would be barred from the resale of any products purchased off the Schedules, and all of their purchases would be required to be in accordance with the ordering guidance of GSA.

At the end of the day, S. 2868 provides the necessary tools to organizations that help people in their most desperate times. This bill allows these essential organizations to focus their finances and resources to directly help people, instead of spending time, energy, and money negotiating for products and services at costs that are higher than the government would pay for them.

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

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

Mr. Speaker, I rise today in strong support of S. 2868, the Federal Supply Schedules Usage Act of 2010. Mr. Speaker, the Federal Supply Schedules Usage Act of 2010 will allow the American Red Cross and other qualified nonprofits that engage in disaster relief and preparedness to leverage the purchasing power of the Federal Government. More specifically, this bill grants the General Services Administration the authority to allow the American Red Cross and other organizations, such as the Salvation Army and Catholic Relief Services, the ability to purchase goods from the Federal Supply Schedules. There is precedence for allowing government entities, quasi-government entities, and certain private entities to buy goods and services from the Federal Supply Schedules. Over the years, Congress has given GSA statutory authority to broaden access to the Supply Schedules.

Currently, all executive agencies, the legislative branch, the District of Columbia, tribes and tribal organizations, certain foreign governments, and quasi-governmental and government chartered agencies such as the Christopher Columbus Fellowship Foundation, the Bonneville Power Administration, and the Civil Air Patrol are eligible to use the Schedules for certain purposes or under certain circumstances.

When this bill came over from the Senate, it was limited to the American Red Cross. But during our committee markup, I offered an amendment expanding S. 2868 to make all qualified nonprofit organizations, nationwide and local, eligible to purchase from the Federal Supply Schedules.

My district, Louisiana's Second Congressional District, located in New Orleans, was devastated by Hurricane Katrina in 2005. In the wake of the hurricane, I observed the multitude of nonprofit organizations beyond the

American Red Cross that provided disaster relief to the city.

In addition to widely recognized national organizations, local relief organizations are also invaluable. They have on-the-ground knowledge of the greatest local needs and how to fulfill those needs. Under the Stafford Act, contracts for disaster relief are to be awarded to local contractors to the extent possible. That is why I introduced my amendment to extend access to the Federal Supply Schedules to these local organizations.

After the tragic earthquake in Haiti, The New York Times listed at least 41 large-scale disaster relief organizations to which Americans could contribute. These organizations were filling a multitude of roles in Haiti and supporting the U.S. Government's presence there. They also should be eligible to purchase goods and services from the Schedules. My amendment and the bill in its entirety received unanimous support in committee.

Mr. Speaker, I urge my colleagues to support S. 2868.

I yield back the balance of my time.

Mr. CLAY. Mr. Speaker, I have no further requests for time, and I yield back the balance of my time.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Missouri (Mr. CLAY) that the House suspend the rules and pass the bill, S. 2868, as amended.

The question was taken; and (two-thirds being in the affirmative) the rules were suspended and the bill, as amended, was passed.

A motion to reconsider was laid on the table.

SUPPORTING DESIGNATION OF NATIONAL HEREDITARY BREAST AND OVARIAN CANCER WEEK AND NATIONAL PREVIVOR DAY

Mr. CLAY. Mr. Speaker, I move to suspend the rules and agree to the resolution (H. Res. 1522) expressing support for designation of the last week of September as National Hereditary Breast and Ovarian Cancer Week and the last Wednesday of September as National Previvor Day.

The Clerk read the title of the resolution.

The text of the resolution is as follows:

H. RES. 1522

Whereas it is estimated that 750,000 people in the United States carry a gene mutation that causes a predisposition to breast and ovarian cancer;

Whereas approximately 5 to 7 percent of breast cancer and 10 to 14 percent of ovarian cancers are hereditary;

Whereas women with these mutations have up to an 84 percent chance of developing breast cancer in their lifetime;

Whereas women with a BRCA genetic mutation have up to a 50 percent lifetime risk of developing ovarian cancer;

Whereas the single greatest ovarian cancer risk factor is a family history of the disease;

Whereas hereditary cancers are often more aggressive than other cancers and occur at a

younger age, when people are less likely to undergo cancer screening;

Whereas breast cancer is the leading cause of cancer death in women under the age of 54;

Whereas ovarian cancer is the leading cause of gynecologic cancer death;

Whereas individuals with a hereditary risk for cancer require different cancer screening and risk management recommendations than the general population;

Whereas inherited BRCA genetic mutations are found in approximately 1 in 40 Ashkenazi Jews and mutations have been found in people of every ethnic group;

Whereas more than one-third of Jewish women diagnosed with ovarian cancer or primary peritoneal cancer at any age, or breast cancer before age 40, carry an inherited BRCA mutation;

Whereas African-Americans and Hispanic Americans are less likely to have access to hereditary cancer information and appropriate health care;

Whereas children of parents with an inherited predisposition to breast and ovarian cancer have a 50 percent chance of inheriting the predisposition;

Whereas among many in the cancer community, a "previvor" is a survivor of a predisposition (or increased risk) to cancer;

Whereas genetic counseling and genetic testing can determine if an individual is at high risk for breast or ovarian cancer;

Whereas raising awareness of hereditary cancer and knowledge of a genetic predisposition can directly lead to preventive strategies that can reduce the chance of dying from cancer;

Whereas the last week of September would be an appropriate week to designate as National Hereditary Breast and Ovarian Cancer Week; and

Whereas the last Wednesday in September would be an appropriate date to designate as National Previvor Day; Now, therefore, be it

Resolved, That the House of Representatives—

(1) supports the designation of National Hereditary Breast and Ovarian Cancer Week; and

(2) supports the designation of National Previvor Day.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Missouri (Mr. CLAY) and the gentleman from Utah (Mr. CHAFFETZ) each will control 20 minutes.

The Chair recognizes the gentleman from Missouri.

GENERAL LEAVE

Mr. CLAY. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks.

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

There was no objection.

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

I rise in support of H. Res. 1522, expressing support for National Hereditary Breast and Ovarian Cancer Week and National Previvor Day. This resolution will help to raise awareness of the risk of these aggressive cancers.

Many Americans are at risk of developing these cancers over the course of their lifetimes, and the risk is even greater for those who are genetically predisposed to contract them. As the resolution notes, hereditary cancers

can be more aggressive than other forms of cancer, and people may develop them at younger ages, when they are less likely to undergo cancer screening. If cancer is diagnosed early, chances of surviving it can increase. I am pleased to join my colleagues to encourage early screening.

House Resolution 1522 was introduced by our colleague, the gentlewoman from Florida, Representative DEBBIE WASSERMAN SCHULTZ, on July 15, 2010, and was referred to the Committee on Oversight and Government Reform. It comes to the floor today with the support of over 80 cosponsors. I thank the gentlewoman, and would like to note that her tenacity in battling and surviving breast cancer should inspire all of us to work as hard as she did to preserve our health.

Mr. Speaker, I urge my colleagues to join me in supporting House Resolution 1522.

I reserve the balance of my time.

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

Mr. Speaker, this one hits close to home. I lost my mother to cancer at a very young age, to breast cancer. My father a few months ago was diagnosed with colon cancer. Difficult to watch and to see. But I rise today in strong support of this House Resolution 1522, expressing support for the designation of the last week of September as National Hereditary Breast and Ovarian Cancer Week and the last Wednesday of September as the National Previvor Day.

Mr. Speaker, I would first like to commend my colleague from Florida who introduced this resolution not only as a Member of Congress, but as a cancer survivor and a previvor herself. For her courage and example, we appreciate it. I also thank Chairman CLAY for his leadership and the ability to work together and to bring this resolution to the floor.

□ 1140

This resolution gives this body an opportunity to raise awareness of hereditary cancers of all kinds, informing as many people as we can of the possibility that they or a loved one may have a genetic predisposition for cancer that can lead to preventive strategies that may significantly reduce the chance of an individual dying from cancer.

Even though it was before my allotted age of 50 when I was supposed to do some screening, I recently went and got a colonoscopy. I will spare you the details of that procedure, but I can tell you that it is well worth it to not only have the peace of mind but to do the responsible thing for our families and get checked for these types of cancers that can go undetected with, really, no symptoms. I am glad I did it, and I am grateful for the medical practices that we have in this country to be able to do that.

Mr. Speaker, an astounding number of women in this country, approxi-

mately one in eight, will suffer from breast cancer at some point during their lives. This year alone, an estimated 209,000 women will be diagnosed with the potentially deadly ailment. While the number of deaths attributed to breast cancer has declined since 1990, roughly 40,000 women are still expected to die this year from the disease. Breast cancer is the leading cause of death in women under the age of 54. When my mother passed away, she was only 52 years old.

Mr. Speaker, while not as common as it is in women, let us not forget about the men who also will suffer from breast cancer. While less than 1 percent of new breast cancer cases are found in men, this number was still almost 2,000 in the year 2008.

Along with breast cancer, ovarian cancer poses another major medical threat to women in this country. Each year in the United States, over 21,000 women are diagnosed with ovarian cancer and approximately 15,000 die from the disease. Ovarian cancer accounts for roughly 3 percent of cancer diagnoses in women in the United States. It is the ninth most common cancer among women. The greatest risk factor is family history of the disease.

Mr. Speaker, approximately three-quarters of a million people in this country are carriers for a gene mutation that causes a predisposition to breast and ovarian cancer. Women that have one of these mutations face nearly an 84 percent chance of suffering from breast cancer at some point during their lives.

Furthermore, women who have the BRCA genetic mutation have up to a 50 percent chance of developing ovarian cancer. Roughly 5 to 7 percent of breast cancer and 10 to 14 percent of ovarian cancer cases are hereditary. More than one-third of Jewish women diagnosed with ovarian or primary cancer at any age or diagnosed with breast cancer before age 40 have been found to be the carriers of the inherited BRCA mutation.

Mr. Speaker, the other purposes of this resolution is to recognize those known as previvors. According to the nonprofit organization FORCE, cancer previvors are “individuals who are survivors of a predisposition to cancer but who haven’t had the disease.” These individuals have a known predisposition for cancer such as a family history or hereditary genetic mutation and must live with a unique set of emotional and medical issues. Previvors are forced to make extraordinarily difficult medical management decisions throughout their lives, the likes most of us will never know.

Mr. Speaker, I again commend my colleague from Florida for introducing this resolution. I applaud her brave fight against breast cancer and for her continued campaign to increase cancer awareness and to combat this horrific disease.

I urge all Members to join me in strong support of House Resolution

1522, and I reserve the balance of my time.

Mr. CLAY. I want to thank my colleague from Utah for promoting an awareness of cancer screening.

Mr. Speaker, I yield 5 minutes to the chief sponsor of this legislation, and one of the most courageous colleagues we have because she is a survivor, the gentlewoman from Florida (Ms. WASSERMAN SCHULTZ).

Ms. WASSERMAN SCHULTZ. Thank you, Chairman CLAY, for your very kind remarks.

Congressman CHAFFETZ, thank you very much for taking the lead on your side of the aisle. Let me just express the grief that I know you felt for the loss of your mother. I have shared that grief with so many women since I shared my own personal story, and hopefully the resolution that we have today will raise awareness so that we can continue to catch more cancer earlier so that we can have more survivors in the United States.

Let me also commiserate with you on the pre-50 experience that I had for a colonoscopy, which wasn’t any fun, but is absolutely necessary. Thank you for mentioning that too, although we all will spare the gory details for everyone. Suffice it to say that it’s not a fun experience, but one that is very necessary.

But I rise today to offer H. Res. 1522, expressing support for designation of the last week of September, this year being the week of September 26, as National Hereditary Breast and Ovarian Cancer Week and the last Wednesday of September as National Previvor Day.

Of all the cancers that affect women, roughly 10 percent of cases are caused by genetic factors. Though this percentage is relatively small, the risk for this group, as you have just heard, is huge.

Women with hereditary risk factors for breast cancer carry an 85 percent lifetime risk of developing the disease. For ovarian cancer, most women have about a 1.5 percent lifetime chance of developing the disease. But for those with hereditary risk factors, that chance can be as high as 50 percent, and as I learned almost 3 years ago, I am one of those women.

Together with my colleagues and inspirational organizations, including Facing Our Risk of Cancer Empowered, or FORCE; Bright Pink; and the Young Survival Coalition, this resolution gives a voice to these women and brings awareness to the risks of hereditary cancer and, as I have said many times and as so many of my colleagues have said on the floor many times, knowledge is power.

Hereditary cancer syndrome describes an inherited gene mutation that increases the risk for one or more types of cancer. The main hereditary breast and ovarian syndromes are caused by mutations in one of two genes, BRCA1 or BRCA2—I am a BRCA2 carrier—which substantially increase the risk for breast and ovarian

cancer and slightly increase the risk for other kinds of cancers.

For women with a hereditary risk of cancer, it often strikes at an earlier age when they are less likely to expect it, but when the cancer is often more aggressive and more deadly. These young women with a heightened genetic risk are known as previvors, individuals who are survivors of a predisposition to cancer, but who haven't yet had the disease.

I was 41 when I discovered that I had breast cancer. Because my cancer was discovered so early, I may have only needed minimal treatment. However, as an Ashkenazi Jewish woman, as a woman of Eastern European Jewish descent, I was at a higher risk of carrying a BRCA mutation, and my early cancer set off warning bells for my doctors.

At the time, I did not know of my increased risk for carrying the BRCA gene mutation, but I was fortunate that once diagnosed with breast cancer, I had access to experts that helped me learn more about what the BRCA gene mutation meant for me. Genetic testing confirmed the worst. Unfortunately, I had hereditary cancer which dramatically increased my chances of a recurrence of breast cancer and getting ovarian cancer as well. Facing my disease, I have become both a survivor and a previvor.

As a mother of three beautiful children, Mr. Speaker, I wanted to make sure that I would be around to see them grow up. I faced tough choices, but seven major surgeries later, I have dramatically reduced the chances that my own cancer will come back.

Fortunately, there are organizations like FORCE, Bright Pink and the Young Survival Coalition that support young women as previvors and as survivors of cancer. These organizations bring essential awareness to these issues and help women at risk by providing the information, support and the voice they need to help survive their hereditary risk. As I said before, knowledge is power.

It is also why, with the help of 377 cosponsors in the House, I filed the Breast Cancer Education and Awareness Requires Learning Young Act, known as the EARLY Act, to bring this message of knowledge and awareness to the forefront of the story about cancer. I am proud that the EARLY Act is now the law of the land.

With the odds stacked against them, young previvors need to know their risks. It is our responsibility to empower these women to know their bodies, speak up about their health, and work together to wipe out these deadly diseases.

I believe this resolution will help in that effort. National Previvor Day and Hereditary Breast and Ovarian Cancer Week, which bridges September's Ovarian Cancer Awareness Month and October's Breast Cancer Awareness Month, will bring added public awareness to the risks for genetic cancers. I encourage all of my colleagues to join me in support of H. Res. 1522.

Mr. Speaker, let me just add, before I close, that I am thrilled to see that our colleague from Connecticut, Congresswoman ROSA DELAURO, who is an ovarian cancer survivor, has joined us on the floor in support of this resolution.

Mr. CHAFFETZ. Mr. Speaker, I don't believe we have any additional speakers.

I continue to reserve the balance of my time.

Mr. CLAY. Mr. Speaker, at this time I would like to yield 2 minutes to the gentlewoman from Ohio (Ms. KILROY).

□ 1150

Ms. KILROY. Thank you, Mr. Chairman.

Mr. Speaker, I rise today in support of House Resolution 1522, which expresses support for the designation of National Hereditary Breast and Ovarian Cancer Week and National Previvor Day. I'm proud to be a cosponsor of this resolution which will raise critical awareness about hereditary cancers and increase knowledge about genetic predispositions which may put some individuals at particular risk.

And just as an aside, I just want to take note that when we passed our health care bill, we made it much more likely that people will get the information to find out about whether they have a genetic predisposition. Without that health care bill which would prohibit discrimination on the basis of an existing condition, many women and men would be afraid to learn more about their genetic histories. But this is critically important information about how you would be able to address certain signs and symptoms and heighten awareness about your particular situation.

We all know someone who has been diagnosed with cancer, and we understand the devastating impact that the diagnosis can have on patients and loved ones. I have been through it with my family, with a very close person in my family with respect to ovarian cancer, and my husband's young cousin is struggling with breast cancer right now. One in two men and one in three women will develop cancer in their lifetime, and in 2010 alone, nearly 1.5 million Americans will be diagnosed with cancer.

Although we have made great strides in recent years in finding new treatments, we must support efforts to find the genetic mutations that increase the likelihood that some people will develop cancer in their lifetimes. We need to work on cures. We need to work on treatments. But finding causes is critically important as well.

We also must encourage everyone to know as much as they can about their own family histories so they can work with their physicians and get the necessary and timely screenings as early as possible. Hereditary cancer can strike at a younger age.

I appreciate this opportunity, and thank you, Mr. Chairman.

Mr. CLAY. Mr. Speaker, I now yield 3 minutes to the gentlewoman from Connecticut.

Ms. DELAURO. Mr. Speaker, I rise in support of declaring the last week of September to be National Hereditary Breast and Ovarian Cancer Week and the last Wednesday of September to be National Previvor Day.

I want to thank my colleagues who have spoken this morning and all of whom have dealt in some way with the issue of breast cancer, ovarian cancer, or maybe some other form of cancer. It is probably the worst day of your life when you are given a cancer diagnosis. You are not listening to what any doctor says. You are only consumed with understanding whether or not you are going to live or die or what is going to happen to your family if such a death should occur.

After heart disease, cancer is still the second-leading cause of death in America, and breast cancer the most common cancer diagnosis. In 2006, over 40,000 women died from this disease. Ovarian cancer, meanwhile, is the fifth most common cancer among women. Close to 14,000 of our friends and family are expected to perish from ovarian cancer this year.

Perhaps the saddest thing about these grim numbers is that some of these deaths are readily preventable. Thanks to modern science, we now know much more about the genetic and hereditary precursors of these cancers and can identify the women most at risk, the previvors that are predisposed to develop them. We also know that women who catch their ovarian cancer at an earlier stage are over three times more likely to survive the disease than those who do not. Sadly, over 60 percent of the women diagnosed with ovarian cancer between 1999 and 2006 fell into this latter category.

Similarly, women diagnosed with breast cancer early are more than four times more likely to survive the disease than women diagnosed at a later stage. And yet one in five women over age 50 have not had a mammogram in the past 2 years.

We have worked to address these troubling statistics with the preventive care reforms in the Affordable Care Act. But there is no substitute for awareness, and that is why I strongly support this resolution and encourage all women, and particularly previvors with a genetic predisposition for those cancers, to get tested early and get tested often.

Twenty-four years ago, it was an early diagnosis of ovarian cancer that saved my life. It was accidental. It should not be accidental. People should not survive by accident.

It is so critically important that this resolution pass. We can save. We can save women, and we save women and we save their families. And I urge my colleagues. I was lucky. My life was given back to me and gave me a second chance. Let's give our families, the women in this country, a first chance and a second chance to survive. I urge my colleagues to support this resolution.

Mr. CHAFFETZ. Mr. Speaker, I urge us all to support and pass this important resolution. This is something that should truly unite us in this fight. We continue to build awareness and encourage people to get checked. And our hearts and prayers go out to those loved ones who are suffering from this, but there is great hope.

I urge my colleagues to get behind this resolution, and I yield back the balance of my time.

Mr. CLAY. Mr. Speaker, in closing, I want to thank my colleagues—the gentlewomen from Florida, Ohio, and Connecticut—for lending their voice to this issue and raising the level of awareness throughout this country as far as the dreaded disease of cancer is concerned.

I urge my colleagues to join me in supporting this measure.

I yield back the balance of my time. The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Missouri (Mr. CLAY) that the House suspend the rules and agree to the resolution, H. Res. 1522.

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. CLAY. 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.

OVERSEAS CONTRACTOR REFORM ACT

Mr. CLAY. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 5366) to require the proposal for debarment from contracting with the Federal Government of persons violating the Foreign Corrupt Practices Act of 1977.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 5366

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 "Overseas Contractor Reform Act".

SEC. 2. REQUIREMENT TO PROPOSE FOR DEBARMENT PERSONS VIOLATING THE FOREIGN CORRUPT PRACTICES ACT.

(a) REQUIREMENT TO PROPOSE FOR DEBARMENT.—Unless waived by the head of a Federal agency under subsection (b), any person found to be in violation of the Foreign Corrupt Practices Act of 1977 shall be proposed for debarment from any contract or grant awarded by the Federal Government within 30 days after a final judgment of such violation.

(b) WAIVER.—The head of a Federal agency may waive this section for a Federal contract or grant. Any such waiver shall be reported to Congress by the head of the agency concerned within 30 days from the date of the waiver, along with an accompanying justification.

(c) FINAL JUDGMENT.—For purposes of this section, a judgment becomes final when all appeals of the judgment have been finally determined, or all time for filing such appeals has expired.

(d) DEFINITIONS.—In this section:

(1) CONTRACT.—The term "contract" means a binding agreement entered into by a Federal agency for the purpose of obtaining property or services.

(2) PERSON.—The term "person" includes—
(A) an individual;
(B) a partnership; and
(C) a corporation.

(3) FOREIGN CORRUPT PRACTICES ACT OF 1977.—The term "Foreign Corrupt Practices Act of 1977" means—

(A) section 30A of the Securities Exchange Act of 1934 (15 U.S.C. 78dd-1); and

(B) sections 104 and 104A of the Foreign Corrupt Practices Act (15 U.S.C. 78dd-2).

SEC. 3. GOVERNMENTAL POLICY.

It is the policy of the United States Government that no Government contracts or grants should be awarded to individuals or companies who violate the Foreign Corrupt Practices Act of 1977.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Missouri (Mr. CLAY) and the gentleman from Utah (Mr. CHAFFETZ) each will control 20 minutes.

The Chair recognizes the gentleman from Missouri.

GENERAL LEAVE

Mr. CLAY. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks.

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

There was no objection.

Mr. CLAY. I yield myself such time as I may consume.

Mr. Speaker, contractors have been tarnishing the name of our good country by bribing foreign officials with the very tax dollars our country pays them. In our effort to win the hearts and minds of the people of foreign countries, we must show that we take integrity and honesty seriously. As such, we must take action against those contractors who hinder our efforts and inappropriately utilize the money we pay them. H.R. 5366, the Overseas Contractor Reform Act, will provide the government with the means to appropriately respond to those contractors.

H.R. 5366 was introduced by my colleague, Representative PETER WELCH, on May 20, 2010, and referred to the Committee on Oversight and Government Reform, where we worked hard to get this important legislation to the House floor.

This bill requires that any person convicted of violating the Foreign Corrupt Practices Act of 1977 be proposed for debarment from any further contracts or grants with the Federal Government within 30 days after final judgment of the violation. The bill defines "final judgment" as occurring when all appeals of the judgment have been determined or all the time for filing such appeals has expired, so there is no question regarding the person's guilt.

Additionally, this bill authorizes the head of a Federal agency to issue a waiver, allowing contracts or grants to be awarded to the contractors, but the agency head must justify the decision and report the waiver and accompanying justification to Congress within 30 days.

□ 1200

This bill also makes it Federal policy that no more contracts or grants should be awarded to any individuals or companies who violate the Foreign Corrupt Practices Act. This policy statement sends a strong message to all that such waste, fraud, and abuse will not be tolerated.

This bill helps fight waste of tax dollars, protects the image of the country, and helps ensure fair play in competition for contracts. H.R. 5366 is a common sense, good government bill, and I encourage my colleagues to join me in supporting it.

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

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

I rise today in support of H.R. 5366, the Overseas Contractor Reform Act. The Committee on Oversight and Government Reform over the years has uncovered numerous instances in which government continued doing business with bad actors. This legislation will augment the U.S. government's efforts to combat waste, fraud, and abuse in contracting. It will ensure that we are awarding contracts and grants only to parties with integrity.

The bill requires a Federal agency to propose for debarment from receiving any new grants or contracts a person or entity found in violation of the Foreign Corrupt Practices Act of 1977.

The Foreign Corrupt Practices Act makes it a crime to offer a bribe to a foreign official for the purpose of obtaining or retaining business from a foreign government.

Since the passage of the Foreign Corrupt Practices Act, the fraud section of the Department of Justice has prosecuted individuals and entities accused of bribing foreign officials. These parties are now subject to fines, and although proposed debarment was already a possible consequence, this bill sends the message that Congress, without question, desires agencies to take administrative action against parties convicted of violating the Foreign Corrupt Practices Act.

This bill also provides agencies with a modicum of flexibility. If the agency head finds it is in the best interest of the government to waive the requirement for proposed debarment, a waiver is permissible. However, the agency head must report the waiver to Congress and provide a justification.

Mr. Speaker, I urge my colleagues to support H.R. 5366.

Mr. DINGELL. Mr. Speaker, I rise in support of H.R. 5366, the Overseas Contracting Reform Act, which provides an important and necessary recourse for our government when