take that money, and we will apply it to pay for some of the bills on ObamaCare.

And that is exactly what they did. So \$1.3 billion was taken from a fund without a congressional vote—an abuse of power undermining Congress's constitutional authority over appropriations. So here we are adding to our total the \$1.3 billion that could have been saved, that was appropriated but not used. It could have been used for many things. We are talking about trying to find ways to pay for Zika funding. This is a serious matter. Zika is having an impact. We have known that. The opposition here—the Democrats—have voted three times to prohibit us from going forward on that. But one of the issues here is the payfor that we are under. If we are going to start a new program or appropriate more money to a program, we want to find something else to pay for it. Well, here is the perfect way to do it, and the amount of money is more than actually requested. Mr. President, \$1.3 billion could be easily used as a pay-for for the Zika problem. That would get the CDC and get the States out there to deal with this very significant and difficult problem. But no, nope; it had to go to ObamaCare. It had to sort of once again fill the gap from expenditures that have gone all over the place.

So what we have done is shown that this is money that we could have saved the taxpayer or that could have used for a better purpose, and under the waste of the week total here, we are now adding this \$1.3 billion, which brings our total to \$240 billion—\$240,785,726,817. It just keeps going up. Here we are sitting on a total of nearly \$241 billion of waste, fraud and abuse.

As I said, fasten your seatbelts, folks; the next one coming in next week is a staggering number of documented waste, fraud and abuse.

Mr. President, with that, I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The senior assistant legislative clerk proceeded to call the roll.

Mr. MARKEY. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

ZIKA VIRUS FUNDING

Mr. MARKEY. Mr. President, we are in a race against time. The number of confirmed locally acquired Zika infections in Florida now total 56. In Puerto Rico, it is estimated that 50 pregnant women are infected with Zika each day. There are now 67 countries and territories around the world reporting Zika cases. The Director of the Centers for Disease Control and Prevention has announced that the agency has exhausted its current funds to combat the Zika virus, but thus far the Republicans have refused to work with the

Democrats to actually provide the new funding in the race to find a vaccine. This is simply unacceptable.

Last month, I visited Cabo Verde off the coast of Africa. I saw firsthand the devastating impacts of the Zika virus. Through a Catholic Relief Services program. I met with mothers and their infants suffering from microcephaly, the birth defect which causes smaller brains and other developmental defects in newborns. I was able to meet with two loving mothers: Dunia, the mother of Dara; and Suely, who is the mother of Senilson. Both babies were born on June 5, 2016. The first case of microcephaly associated with the Zika virus on Cabo Verde was detected in March, just 6 months after the disease was declared an epidemic in the country. Now there are more than 7,500 reported cases of Zika on Cabo Verde. and the number continues to grow.

Zika is a terrifying virus. It is the only known mosquito-borne virus that can cause birth defects and also be sexually transmitted. In addition to microcephaly, Zika also has been connected to neurological effects in individuals of any age, including a link to the onset of Guillain-Barre syndrome, which can cause paralysis for months. One bite from an infected mosquito could damage the course of a life forever.

We need only look back a few chapters in our own history books to understand how important it is for humanity to find a vaccine for a virus like Zika.

In 1953, there were 35,000 annual cases of polio in the United States. Mothers and fathers all across America were frightened that their children would be next to contract the debilitating disease. Two U.S. researchers, Dr. Albert Sabin and Dr. Jonas Salk, were locked in a historic race to develop a safe and effective polio vaccine. Fortunately, they were both successful. Today, those vaccines have virtually eliminated polio around the world.

Now, in 2016, millions of parents and dozens of countries around the world are once again praying that the medical community can be catalyzed to develop a solution for today's global disease threat—the Zika virus.

We are fortunate that in today's new race for a cure, there are at least three leading Zika vaccine candidates. Last month, I toured the laboratories at Beth Israel Deaconess Medical Center in Boston, which is collaborating with Walter Reed Army Institute of Research. Their vaccine candidate has been found to offer universal protection against the Zika virus in laboratory tests. The results were so promising that the vaccine will be tested in a small group of individuals—human beings—this fall.

There are two other vaccine candidates also showing positive results. One is made by the National Institutes of Health and the other by Inovio Pharmaceuticals. Both are far enough along that they are already utilizing human subjects, but if the current trials in-

volving just the small groups are successful, we will need to provide much more funding to cover the costs of expanding this research to thousands of participants. That next step in the Zika clinical trials, if both of these candidates that I just mentioned are successful, could cost upward of \$100 million to \$200 million, beginning as soon as this January, if these clinical trials are successful with small numbers of human beings. That is a small amount of money when one considers that the cost of caring for one infant born with Zika-caused microcephaly will cost potentially up to \$10 million through the life of that baby.

Six months ago, knowing the impeding and impending threat of Zika once we entered the warm, mosquito-loving. hot summer months, fueled further by climate change, President Obama requested \$1.9 billion in emergency funds from Congress to combat Zika, but instead of approving emergency funding at the start of the summer, Republicans, unfortunately, did not finish the business that we should have finished before they recessed Congress for 7 weeks. Families cancelled their summer vacations out of fear, while Republicans made Congress go on a vacation. Meanwhile, cases of Zika on our own soil, in Puerto Rico, and around the world ticked higher and higher.

Whether it is Zika, Ebola, SARS, or the next global pandemic, we simply cannot treat every global health threat like a game of Whac-A-Mole. We need a sustainable and comprehensive emergency medical system that is put in place so we can respond to all emerging infectious disease threats.

First, we need a Federal fund that is readily available for use when a global disease represents itself. Second, we need a single person at the White House responsible for organizing domestic efforts as well as liaising with our international partners in the face of an infectious disease pandemic. We did this on Ebola. We should do it for every global health threat.

The truth is, though, that if on Ebola we had already had a pandemic response team in place, we probably could have cut the amount of death and harm that was done by that disease by a dramatic amount, but the most important thing we need right now is we need the congressional Republicans to stop playing politics and work with Democrats to pass a real and serious response to the Zika crisis, including emergency funding. The fastest way to do this is for the House to bring a bipartisan, Senate-passed \$1.1 billion compromise bill to address the Zika epidemic and bring it up for a vote. We have already passed that through the Senate. House Republicans should just take it up, vote on it, and we will get it done. It is only a matter of time before the fear of local transmission in Florida becomes the reality for nearly every State in this Nation. That is why immediate funding is a critical component of the U.S. and global fight

against the Zika virus. We have the intellectual capacity to develop faster diagnostic tests, efficient vaccines, and advanced therapeutics with Zika, but what we need now is the financial certainty to support this kind of work in an accelerated way. The next pandemic that awaits the global community is just one frequent flier account away. This crisis demands that Congress pass a Zika funding package as soon as possible. The continuation of vaccine development depends on it, our ability to stop the spread of the virus depends on it, and the lives of millions of people around the world depend on it.

We won the race against polio in the 1950s. With accelerated funding, we have the opportunity today with these three vaccine candidates and others on the way to find a safe and effective solution to combat Zika by 2018. It is time to recognize the threat to humankind and the impact such a harmful disease will have on an entire generation of children by ensuring our 21st century scientists—our Sabins and Salks—have the funding they need to banish this virus to the history books. Mr. President, I yield the floor.

The PRESIDING OFFICER. The Senator from Nebraska.

HONORING NEBRASKA'S SOLDIERS WHO LOST THEIR LIVES IN COMBAT

Mrs. FISCHER. Mr. President, I rise to continue my tribute to Nebraska's heroes and the current generation of men and women who have given their lives defending our freedom in Iraq and Afghanistan. Each of these Nebraskans has a powerful story.

CAPTAIN ROBERT J. YLLESCAS

Today I will reflect upon the life of Army CPT Robert Yllescas of Osceola, NE.

Rob's life began in Guatemala, where he was born and raised. His mother Barbara would often bring young Rob to Nebraska during visits to her family in Osceola. When in Nebraska, Rob made plenty of friends, and he fell in love with the good life.

He also met a young girl named Dena, who would one day become his wife. After graduating high school in Guatemala in 1996, Rob moved to Nebraska permanently, and he enrolled at the University of Nebraska-Lincoln. He also enlisted in the Nebraska Army National Guard. Rob had always wanted to serve in the military. He hoped to become a general one day. With this in mind, Rob enrolled in Army ROTC at UNL.

Fate had something else in store for Rob during his college years too. He reconnected with Dena. They fell in love, were engaged a year later, and were married on July 29, 2000. Rob continued his studies and training, later graduating from UNL in May, 2001, receiving his commission as a second lieutenant in the U.S. Army.

That August, Rob and Dena welcomed the birth of their first daughter,

Julia. A short time later, Lieutenant Rob Yllescas began his first Active-Duty assignment on September 10, 2001. The very next day, everything changed for Rob, his family, and our Nation. America's military priorities transformed dramatically, focusing on a new mission to combat terrorism.

From the beginning of his military service, Rob's commanding officers took note of his character and his leadership. One commander said, "Yllescas was an extraordinary person to be around. He brought that 'lead from the front' mentality into his work."

Another soldier who served with him said Rob "was strong as an ox with a smile as big as Nebraska."

Over the next several years, life became fast-paced for the Yllescas family. Rob deployed to Iraq in 2003 for a year, and then he returned for a second deployment in 2005, when the fighting grew more intense. Returning home to Nebraska in 2006, Rob continued to excel in the military, later graduating from Army Ranger School. Rob achieved the rank of captain and was assigned to the 6th Squadron of the 4th Cavalry Regiment. He took command of Bravo Troop, known as the Blackfoots.

After nearly 2 years of training and earning the respect of his troops, Rob learned he would deploy to Afghanistan. Shortly before his deployment, Rob and Dena welcomed their second daughter. Eva. on February 1, 2008. Upon arriving in Afghanistan, Captain Yllescas and Bravo Troop were stationed at Camp Keating. This outpost, located in the eastern province of Nuristan, was known to many as the most dangerous territory in Afghanistan. Camp Keating had been under constant attack since becoming operational in 2006. Two prior camp commanders had been killed before the Blackfoots arrived.

Once again, Captain Yllescas made an immediate impact. His lead-from-the-front approach earned the respect of his men and improved the relations with the local Afghan leaders. Rob carried himself with a grace that would calm the nerves of these community leaders, and he often met with them unarmed and without that full battle rattle, but his charismatic style and the improved relations quickly became a threat to the enemy forces in the region.

Camp Keating, located in the Kamdesh District, was known to American troops as the "Tip of the Spear." Al Qaeda and militants moved freely through this area from safe havens in Pakistan. They filtered weapons and ammunition through this region to engage with coalition forces throughout Afghanistan

One soldier described his tour at Camp Keating, saying: "I was either extremely bored or extremely terrified." For months, Captain Yllescas and his Blackfoots continued their focus on improving relations with the local Afghan community, and things

seemed to be moving in the right direction.

As Captain Yllescas made progress, he also drew the attention of the enemy militants. By the fall of 2008, they were coordinating plans to remove this threat to their supply chain. On October 28, 2008, a remotely controlled IED was detonated and seriously wounded Captain Yllescas as part of a planned assassination attempt. Rob was quickly evacuated out of Afghanistan. He was stabilized and moved to the Bethesda Naval Medical Center outside of Washington, DC.

Throughout this time at the medical center, Dena remained at his side. During Rob's second week at Bethesda Medical Naval Center, President George W. Bush visited him on November 10 and personally awarded him the Purple Heart. Rob's best day occurred when his daughter Julia entered his hospital room. Just seeing Julia seemed to ease his mind.

Ultimately, Rob's severe leg and head wounds were too much to overcome. CPT Robert Yllescas died on December 1, 2008. A week later, the auditorium in Osceola, NE, was filled to capacity with people honoring their hometown hero. In the time since, Dena and Rob's mother Barbara have become very active in the Gold Star family activities throughout Nebraska. His daughters Julia, who is now 15, and Eva, now 8, are also active in this cause. The two of them are well known for their beautiful voices and singing of patriotic songs at veterans events.

For his service to our Nation, CPT Rob Yllescas earned many military decorations. Among the many important badges and decorations he earned, Captain Yllescas was awarded the Bronze Star, Purple Heart, Iraq Campaign Medal, Afghanistan Campaign Medal, and the Ranger Tab. CPT Robert Yllescas embodied the pride of his State, served his country, and loved his family. I am honored to tell his story.

I yield the floor.

The PRESIDING OFFICER. The Senator from New Jersey.

ZIKA VIRUS FUNDING

Mr. MENENDEZ. Mr. President, I rise to voice my concern as an American and my outrage as a grandfather-to-be about the lack of action to fund our response to the Zika epidemic. Zika has come to Miami, FL, and Congress needs to step up and provide the necessary funds to fight this terrible virus

Zika is like any other national emergency, and we are a nation that always—always—responds to emergencies. While I am encouraged with the news that Republicans are seeing fit to do their job and drop some of the conditions in their Zika bill, which this body has voted down three times already, there is no excuse for any further delay—no excuse for doing nothing while Americans face a risk that we have the power to mitigate.