

and ranking member of the Antitrust Subcommittee in the Senate for over a decade now.

As she mentioned, she is the lead cosponsor with me on this bill. We have worked together on it.

Look: I agree completely that we need to hold Big Tech accountable under antitrust laws. If you want to hold Big Tech accountable, pass this bill. Pass this bill today. There is not a reason to delay.

No, I understand and appreciate her desire to pass the Klobuchar-Grassley bill. I get that. It is a different proposal. It is not inconsistent with this one. There is no reason why this one couldn't pass and still allow the other one to move forward, nor is there any reason why this measure becoming law would, in any way, undermine that legislation or that legislative proposal.

As to reaching a deal or not reaching a deal, we have been in conversations with the office of Senator KLOBUCHAR for months—literally, months—about it. We talked about different strategies for making sure that we could get it passed—what might have to change. We both discussed the fact that we preferred to keep the bill intact with the retroactivity provisions in there, but, if necessary, we could remove the retroactivity provisions if, by so doing, we could get it past the hotline. All of that has been done in consultation with the office of the Senator from Minnesota for months—literally months. So none of this is a surprise. This was done in tandem with Senator KLOBUCHAR's office.

Finally, I feel the need to push back against the notion that whenever something bigger could happen, nothing smaller in that area may be allowed to pass prior to that. This is a discreet, very specific fix to antitrust law that is desperately needed—urgently needed in order to hold Big Tech accountable under our antitrust laws. There is no good reason to delay this, and it is unfortunate today that we can't do that. I least expected it from the lead cosponsor of the legislation.

THE PRESIDING OFFICER. The Senator from Minnesota.

Ms. KLOBUCHAR. Again, I look forward to working with Senator LEE to pass this bill, and I also look forward to passing a bill on the Federal basis and not just deciding that this should be in the province of 50 different States, and I thoroughly plan to work with him to pass this bill, and I hope it will be soon.

I suggest the absence of a quorum.

THE PRESIDING OFFICER. The clerk will call the roll.

The legislative clerk proceeded to call the roll.

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

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

UNANIMOUS CONSENT REQUEST—S. RES. 631

Mr. PAUL. Madam President, I rise today out of a desire to protect the

rights and the health of the young men and women who serve the Senate as pages.

I think we could all agree that the Senate wouldn't function well without pages. The very first Senate page was a 9-year-old boy named Grafton Hanson. He was appointed by Daniel Webster in 1829. In those days, the pages' jobs were to refill the inkwells and clean out spittoons. Fortunately, things have improved a bit for the pages. The work isn't quite as messy anymore, but it is still a high-pressure job for a high school student.

When I was here on the floor voting last week, I noticed that the pages were all wearing masks, but none of my colleagues were. I threatened to come to the floor to seek unanimous consent to end the mask mandate, and the next day, the mandate ended. Coincidence? Perhaps.

The new policy states, though, that the mask-wearing will become optional for pages who test negative. But once again, we see the masks on the floor.

I urge my colleagues to look around. The pages are still wearing masks. The COVID policy for the Senate pages requires the reinstitution of a mask mandate if they have supposedly been exposed.

Apparently, there are rules for the pages of the Senate, but not for the President of the Senate, KAMALA HARRIS. When Vice President HARRIS was deemed potentially exposed to COVID, she not only presided over the Senate's confirmation vote of Justice Ketanji Brown Jackson, but was also seen at the White House with the President, the First Lady, and the Justice without a mask. Rules for thee but not for me.

Jen Psaki justified the Vice President's violation of the COVID guidelines by stating that it was an emotional day. I guess if you are feeling like it is an emotional day then you can do what you please, unless you are a page. The impressive thing about that absurd defense was that Psaki was able to say it with a straight—and maskless—face.

But an unseasoned mask mandate is not all that is required of the pages. According to the guidelines: "All pages are required to be fully vaccinated; if their initial vaccination series was completed at least five months ago, pages are required to obtain [a] booster [shot]" to participate in the Page Program.

From day one, our country's response to this pandemic has made the comfortable more comfortable, while the working class or kids or people with no power have to keep on working but have to obey rules that the adults don't have to themselves.

Now in the halls of Congress we have created a privileged class that can choose whether to get vaccinated and an underclass that has to abide by dictate. It makes absolutely no sense to mandate COVID vaccinations for teenagers who are healthy. It makes even

less sense to mandate a booster. There is no scientific evidence that boosters are valuable, and there is scientific evidence that boosters increase the risk of a heart inflammation for young adolescent males.

A study published last month in the *Journal of the American Medical Association Cardiology* examined over 23 million people ages 12 and up across Denmark, Finland, Norway, and Sweden. It concluded that the risk of myocarditis, an inflation of the heart, "was more pronounced" after a second mRNA vaccine dose, "and the risk was highest among males aged 16 to 24 years."

This is exactly why several European countries, including Germany, France, Finland, Sweden, Denmark, and Norway, all restrict the use of mRNA vaccines for COVID—particularly for adolescents, particularly for adolescent males. The policy of our pages does not address this issue at all and blindly commands boosters.

In fact, if you read the policy, you could imagine an endless stream of boosters. Every 5 months that you haven't had another vaccine you would be required to get a booster.

Last fall, the director and deputy director at the FDA's Office of Vaccines Research and Review both resigned. Realize who these people are. They are on the vaccine committee. They are pro-vaccine. Both of them are actually pro-vaccine mandate. Yet, they resigned from the Government, as reported, "citing White House pressure to approve third doses for all adults and writing damning op-ed's critical of the FDA's subsequent decision to do so."

It became a political decision. The committee voted against extending boosters to kids, and then it was overruled by politicians at the White House. These two researchers, long esteemed, who have been on this committee for years, resigned in protest.

One of the op-eds that ran in the *Washington Post* was coauthored by Dr. Paul Offitt, a professor of pediatrics and director of the Vaccine Education Center at Children's Hospital of Philadelphia.

Once again—not an opponent of vaccines; a proponent of vaccines, a guy who has been on the vaccine committee for decades.

As a Member of the FDA's advisory committee, Dr. Offitt, though, did not support widespread boosting when the committee met to consider boosters for all adults in September and October. He and the two former FDA officials wrote: "A healthy young person with two mRNA doses is extremely unlikely to be hospitalized with COVID, so the case for risking any side effects," the case for forcing them to take a third vaccine when their risk of COVID after two vaccines is nearly, if not virtually, zero, he says—or they said that the case for risking any side effects—such as myocarditis—diminishes substantially.

What happens is myocarditis is a rare event for vaccines, more common with young adolescent males. But you have to compare the risk of getting myocarditis with the vaccine to the risk of the disease. Young people who have been vaccinated twice—even without vaccines, young people, the death rate under 15 is 1 in 2.32 million. With the vaccine it is probably zero. We have studies of millions of people. We can't find kids that are dying or going to the hospital with two vaccines. And yet the policy for pages in this body is a booster—a mandated booster. It is actually malpractice. It is malpractice to give a booster, a third vaccine, to an adolescent male and probably to an adolescent female. There is no evidence it helps them.

Then the other argument goes like this: Oh, we don't want them to transmit it to people. Guess what? We have done a study on that, too. Vaccinated versus unvaccinated: 25 percent of the household will transmit it. It is the same for both groups. The vaccine protects you from hospitalization and death. It does not prevent transmission.

So we are going to vaccinate these kids to take care of the old folks in the Senate. It is not true. And they have already been vaccinated twice. The third vaccine—there is no scientific evidence. There is, however, evidence that it is a danger to them. And to ignore that danger, to be supportive of force I think is without question the wrong way to go.

In January, a piece in *The Atlantic* cited Dr. Offitt—once again, a vaccine supporter who has been part of the vaccine committee with the FDA for decades—as saying this:

Getting boosted would not be worth the risk for the average healthy 17-year-old boy.

This is coming from an advocate of vaccines—not a denier, not someone who hasn't been vaccinated. His son has been vaccinated, I believe, twice. But he said he wouldn't do it for a 17-year-old. In fact, he advised his son publicly, who is in his early 20s, not to get the third dose.

What if I am wrong? What if Dr. Offitt is wrong? I don't know. What if it is a controversy? Wouldn't we allow it, maybe, in a free society, up to free individuals consulting with their parents whether you want to get them? But, no. Everything is about force. Everything is about mandates. Do as I am told, even when the science doesn't support it—even when the science is arguable. Do it or we will fire you. Do it or we will send you home. I think it is a terrible example and, coming from the Senate, an awful precedent.

The *Chicago Thinker* is a paper for the University of Chicago, and the students there put it in a January 11 editorial. These are the kids who are being forced to do boosters as well:

If being “boosted” becomes a prerequisite for participation in normal life, the vaccine's diminishing efficacy means the booster campaign will never end.

See, we know this. This is the truth of the matter. While the vaccine does help you to prevent hospitalization and death, we know it has diminishing efficacy, meaning that it wears off, so you have to keep getting boosted and boosted and boosted. But shouldn't we at least study it? Shouldn't we be honest with these kids in that their death rate is virtually zero with nothing? If you vaccinate them, it is zero, and then we have just got to keep vaccinating them. Just do as you are told. Submit to the State. Do whatever people tell you despite the science; despite three scientists from the FDA's vaccine committee saying it is not warranted; despite people arguing that it is actually malpractice and puts these young people at risk to make them get a third vaccine.

In December, Dr. Marty Makary, a professor at the Johns Hopkins School of Medicine, wrote in the *Wall Street Journal*:

The U.S. government is pushing Covid-19 vaccine boosters for 16- and 17-year-olds without supporting clinical data. A large Israeli population study, published in the *New England Journal of Medicine* earlier this month, found that the risk of COVID death in people under 30 with two vaccine shots was zero.

The risk of death is zero, and we are forcing them to get a third shot for which we know, from large, million-person studies, there is a side effect of heart inflammation.

Even World Health Organization Chief Scientist Dr. Soumya Swaminathan said in January that there is no evidence right now that suggests healthy children and adolescents need booster shots.

So most of Europe has actually said don't take it because of the risk of myocarditis, and the head of the WHO says there is no health reason for which to do it. Yet the Senate thinks it is smart enough to mandate these kids. God forbid one of them dies. God forbid one of them gets myocarditis.

Dr. Martin Kulldorff, an epidemiologist from Harvard Medical School, says that mandating people who have already had COVID to still get vaccinated “makes zero sense from a scientific point of view, and it makes zero sense from a public health point of view.”

Furthermore, we now know the CDC released that, under age 11, 75 percent of the kids have already had it. So, in the age category of the pages and a little older than that, we are looking at a 70- to 75-percent chance they have already had it; they have already been vaccinated; their chance of death is zero. Yet it is not enough. They must submit—submit to the man; submit to the woman; submit to the State.

The science isn't there. It is all about submission.

Then we have weak lapdogs who just say: Go ahead and force them. We don't care. It is not very likely they will die. It is only a few out of 100,000 we may lose.

A study in *The Lancet* last September supported this view, stating:

Current evidence does not . . . appear to show a need for boosting in the general population.

This is not just in kids. This is in *The Lancet*, saying there isn't evidence for boosting in the general population.

What has been accepted by most people is that boosting for those at risk—those of age, those with obesity, those with, you know, other risk factors—is not an unreasonable thing. For most of the people our age and older, the vaccine, without question, is safer than the disease, but the disease is so rare, so uneventful, and the death rate so low in children that you need a near-perfect vaccine to say: Take the vaccine versus the disease.

Even then, wouldn't you want to know if they had had it? Wouldn't we want the CDC to release, if you have had COVID or if you have had COVID and have been vaccinated, what your chances are of going to the hospital?

They actually did look at this for a large population study, and they found that, if you were vaccinated versus unvaccinated, you were 20 times less likely to go to the hospital. I still believe that to be true, and I think it is for the overall population. It is probably not measurable for kids because kids aren't largely affected by this.

Do you know what they also measured? They measured unvaccinated versus the unvaccinated who have had COVID—and guess what. You were 55 times less likely to go to the hospital. The disease is an incredibly potent source of immunity. If you have been vaccinated and had the disease, I think you would calculate that in.

Do you just blindly submit and just take 100 vaccines and take it every 6 months or would you want to talk to your doctor and say: Well, I had COVID in January, and I have had two vaccines. I am relatively thin and relatively healthy. What do you think?

Wouldn't there be a decision-making process?

When we are talking to children—the young men and women at the ages of 15 and 16 years old, many of whom have had COVID already and have already had vaccines—wouldn't we want them to be part of the decision making?

Wouldn't we say: What do your parents think?

Wouldn't we ask for parental consent?

This is insane what we are doing. We have taken off on a tangent where things that were once private decisions are now the realm of the State.

In the study in *The Lancet*, they stated that the “[c]urrent evidence does not . . . appear to show a need for boosting in the general population, in which efficacy against severe disease remains high,” and “currently available evidence”—this is also from *The Lancet*—“does not show the need for widespread use of booster vaccination in populations that have received an effective primary regimen.”

So here we have a not insubstantial journal, *The Lancet*. Now, you can disagree. You can disagree with the *New England Journal of Medicine*. You can disagree with *The Lancet*, but for goodness' sake, wouldn't you at least admit that it is an argument and that when there is an argument that has valid facts on both sides of it that maybe the individual ought to get to decide?

The *Lancet* says:

Currently available evidence does not show the need for widespread booster vaccination in populations that have received an effective primary vaccination regimen.

There is absolutely no clinical data to support other than a bunch of bureaucrats who want to command you. There is no clinical data to say that 15- and 16-year-olds ought to get a booster—zero.

When we consider the rules for pages, we ought to ask: Will these policies be expected to continue indefinitely? And, if so, to what end? based on what data? When will they change?

We have got them in here wearing masks. The Vice President doesn't wear a mask when she is exposed. Look across all the pages of the news. Everybody has been exposed. I think we have had 8 to 10 Senators who have had COVID in the last couple of weeks. Do you think everybody who ran into them wore a mask for 2 weeks? No, nobody is doing it. Nobody is paying any attention to these people, but the pages are stuck under the thumb of these public health czars.

When we consider the rules, we ought to ask: When will this end?

When it comes to vaccines, though, they can benefit the vaccinated person, but it doesn't stop transmission. The best data we have comes from Denmark, where vaccines were not shown to have any impact on household viral transmission or the secondary attack rate. In other words, whether vaccinated or unvaccinated, they both transmitted the disease equally.

It is no coincidence that the Scandinavian countries have moved on to a targeted testing and treatment regime. They are no longer just saying for everybody to submit and for everybody to do the same thing. They are targeting the disease and those who are at risk. They don't expect people to live in a state of constant fear under an endless public health emergency. Instead, public health officials issue recommendations about how those at risk can protect themselves. They give advice.

There was a time in the history of our country when public health officials gave advice, not dictates or mandates. Realize the policy we are adhering to is the same policy that Dr. Fauci espouses, and you know what his response was.

When the court struck down the mask mandate on planes, do you know what Dr. Fauci had the audacity to say? He said: How dare the courts involve themselves in public health. We are not smart enough. Nobody outside the realm of Dr. Fauci is smart enough,

but how dare the courts or the Constitution adjudicate what is individual liberty, what is the responsibility of government, and whether the CDC has the power to have mask mandates—none of this.

How dare they? That was his response.

Some offered a different approach. Some offered a more targeted approach to this. It is what Dr. Scott Atlas called for when he was at the White House in the last administration, but his voice was deliberately drowned out by Dr. Fauci and others who attempted to govern by stick rather than carrot.

Public health measures should be backed up with proof that the benefits outweigh the burdens. There is no evidence of that when it comes to vaccination mandates, especially for teenagers, who as a group are less vulnerable to this virus than any Senator. That is why I am asking unanimous consent that the Senate pass my resolution to end all COVID mandates for pages and respect their privacy, their rights, their medical freedom, and their health for the young men and women who serve in this Chamber.

Madam President, as in legislative session, I ask unanimous consent the Senate proceed to the consideration of S. Res. 631, which is at the desk. I further ask that the resolution be agreed to and that the motion to reconsider be considered made and laid upon the table with no intervening action or debate.

The PRESIDING OFFICER. Is there objection?

The Senator from Missouri.

Mr. BLUNT. Madam President, in reserving the right to object, my colleague Senator PAUL is well-intended in this recommendation, and I listened to it carefully, as I am sure others did.

The Page Program, which has been in effect since 1829, has become a program of both opportunity and education and is a program that the Page Board, the Senate Page Board, has responsibility for.

I would say, in looking at the immediate future, the pages who are here now, the pages who have agreed to be pages in the summer, and the pages, I think, who are in line to be pages in the fall—and their families—have all looked at these recommendations. They have all decided they are recommendations they would be able to meet. Maybe more importantly, they also have decided to make that family decision for their children to be here and be pages as high school juniors, perhaps, because of the standards that have been set that they are well aware of.

I would hope that Senator PAUL would continue to talk to the Page Board. I think the Page Board has a very important job to do. They accept an incredible responsibility of the relationships that they have decided to enter into between the pages, their families, and the Page Board in representing the Senate.

That Board has some oversight from the Rules Committee, and I yield to the chairman of the Rules Committee.

The PRESIDING OFFICER. The Senator from Minnesota.

Ms. KLOBUCHAR. Madam President, I thank Senator BLUNT for his statement.

I join him in opposing this resolution.

As chair of the Rules Committee, with oversight of the Sergeant at Arms who helps manage the Senate Page Program, I know, like Senator BLUNT does and everyone here does—I see Senator LEAHY is here, the Presiding Officer, and Senator PAUL—how hard the dedicated pages, who come from States across the country, work to help us do our jobs here on the Senate floor. We are so excited when we have someone from our States come and join us as a page. They are, too, as are their families.

As we continue to reopen the Capitol, which I strongly support, we must also take into account the health and safety of everyone who works and visits here, including our pages. This resolution would reverse the Page Program's—as Senator BLUNT noted—current policy and prohibit any requirement for pages to be vaccinated against COVID-19.

It would also prohibit requiring pages to undergo COVID testing or wear a mask regardless of guidance from the Office of the Attending Physician or the CDC. This includes reversing the policy that all pages must wear a mask if one tests positive—a commonplace rule to protect healthy pages, who all live in the same dormitory, which, I think, is the defining part of this.

In light of recent events, we know that staff, Senators, as well as pages, have tested positive in the past few weeks. In light of these recent events, the Attending Physician, Dr. Monahan, has recommended that all pages wear masks. I believe in science. I believe we should listen to Dr. Monahan. Local public health officials have also decided, by the way, to require vaccines for certain eligible students in Washington, DC, including those attending our page school here in the Senate.

I agree with Senator BLUNT in that the Page Program needs flexibility to set its own policies to protect the health and safety of pages. We should not put these young people who have come here to work in the heart of our democracy at risk unnecessarily.

We all know that the vaccine helps greatly if someone gets sick. I know that because my husband got really sick before there was a vaccine. He is healthy, and he ended up in the hospital for a week on oxygen. That might shape my response here, but I believe that if he had had the vaccine, we wouldn't have come that close to losing him.

I believe in science. And so I join Senator BLUNT in this objection. And we look forward to seeing these pages and many pages serve us well in the coming years; therefore, I object.

Thank you.

I yield the floor.

The PRESIDING OFFICER. Objection is heard.

VOTE ON MOTION TO DISCHARGE

The PRESIDING OFFICER. The question is on agreeing to the motion to discharge.

Mr. LEAHY. I ask for the yeas and nays.

The PRESIDING OFFICER. Is there a sufficient second?

There appears to be a sufficient second.

The clerk will call the roll.

The bill clerk called the roll.

The result was announced—yeas 50, nays 50, as follows:

[Rollcall Vote No. 174 Ex.]

YEAS—50

Baldwin	Hickenlooper	Reed
Bennet	Hirono	Rosen
Blumenthal	Kaine	Sanders
Booker	Kelly	Schatz
Brown	King	Schumer
Cantwell	Klobuchar	Shaheen
Cardin	Leahy	Sinema
Carper	Lujan	Smith
Casey	Manchin	Stabenow
Coons	Markey	Tester
Cortez Masto	Menendez	Van Hollen
Duckworth	Merkley	Warner
Durbin	Murphy	Warnock
Feinstein	Murray	Warren
Gillibrand	Ossoff	Whitehouse
Hassan	Padilla	Wyden
Heinrich	Peters	

NAYS—50

Barrasso	Graham	Portman
Blackburn	Grassley	Risch
Blunt	Hagerty	Romney
Boozman	Hawley	Rounds
Braun	Hoeven	Rubio
Burr	Hyde-Smith	Sasse
Capito	Inhofe	Scott (FL)
Cassidy	Johnson	Scott (SC)
Collins	Kennedy	Shelby
Cornyn	Lankford	Sullivan
Cotton	Lee	Thune
Cramer	Lummis	Tillis
Crapo	Marshall	Toomey
Cruz	McConnell	Tuberville
Daines	Moran	Wicker
Ernst	Murkowski	Young
Fischer	Paul	

(Mr. SCHATZ assumed the Chair.)

The VICE PRESIDENT. On this vote, the yeas are 50 and the nays are 50.

The Senate being equally divided, the Vice President votes in the affirmative, and the motion is agreed to.

The nomination is discharged and will be placed on the calendar.

ORDER OF PROCEDURE

Mrs. MURRAY. Madam President, I ask unanimous consent that the Senate now vote on confirmation of Executive Calendar No. 718, the nomination of Susan Grundmann, as provided under the previous order, and that following disposition of that nomination, the Senate proceed to the consideration of the Powell nomination and at 1:45 p.m., vote on confirmation of the nomination.

The PRESIDING OFFICER (Mr. SCHATZ). Is there objection?

Without objection, it is so ordered.

EXECUTIVE CALENDAR

Under the previous order, the Senate will resume consideration of the

Grundmann nomination, which the clerk will report.

The legislative clerk read the nomination of Susan Tsui Grundmann, of Virginia, to be a Member of the Federal Labor Relations Authority for a term of five years expiring July 1, 2025.

VOTE ON GRUNDMANN NOMINATION

The PRESIDING OFFICER. The question is, Will the Senate advise and consent to the Grundmann nomination?

Mrs. MURRAY. Mr. President, I ask for the yeas and nays.

The PRESIDING OFFICER. Is there a sufficient second?

There appears to be a sufficient second.

The clerk will call the roll.

The legislative clerk called the roll.

Mr. DURBIN. I announce that the Senator from Vermont (Mr. LEAHY) is necessarily absent.

The result was announced—yeas 50, nays 49, as follows:

[Rollcall Vote No. 175 Ex.]

YEAS—50

Baldwin	Hickenlooper	Reed
Bennet	Hirono	Rosen
Blumenthal	Kaine	Sanders
Booker	Kelly	Schatz
Brown	King	Schumer
Cantwell	Klobuchar	Shaheen
Cardin	Lujan	Sinema
Carper	Manchin	Smith
Casey	Markey	Stabenow
Coons	Menendez	Tester
Cortez Masto	Merkley	Van Hollen
Duckworth	Murkowski	Warner
Durbin	Murphy	Warnock
Feinstein	Murray	Warren
Gillibrand	Ossoff	Whitehouse
Hassan	Padilla	Wyden
Heinrich	Peters	

NAYS—49

Barrasso	Graham	Risch
Blackburn	Grassley	Romney
Blunt	Hagerty	Rounds
Boozman	Hawley	Rubio
Braun	Hoeven	Sasse
Burr	Hyde-Smith	Scott (FL)
Capito	Inhofe	Scott (SC)
Cassidy	Johnson	Shelby
Collins	Kennedy	Sullivan
Cornyn	Lankford	Thune
Cotton	Lee	Tillis
Cramer	Lummis	Toomey
Crapo	Marshall	Tuberville
Cruz	McConnell	Wicker
Daines	Moran	Young
Ernst	Paul	
Fischer	Portman	

NOT VOTING—1

Leahy

The nomination was confirmed.

The PRESIDING OFFICER (Mr. KING). Under the previous order, the motion to reconsider is considered made and laid upon the table, and the President will be immediately notified of the Senate's actions.

EXECUTIVE CALENDAR

The PRESIDING OFFICER. Under the previous order, the Senate will proceed to the consideration of the Powell nomination, which the clerk will report.

The senior assistant legislative clerk read the nomination of Jerome H. Powell, of Maryland, to be Chairman of the Board of Governors of the Federal Re-

serve System for a term of four years. (Reappointment)

The PRESIDING OFFICER. The Senator from Ohio.

Mr. BROWN. Mr. President, I ask unanimous consent that I be able to complete my remarks, which will be brief.

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

U.S. FEDERAL RESERVE NOMINATIONS

Mr. BROWN. Mr. President, since President Biden took office, we have made tremendous economic progress as a country. Our economic growth last year exceeded that of China's for the first time in 20 years, and Federal Reserve nominees who have come before the Senate are crucial to continuing that progress. As Americans face rising prices caused by corporate greed, a global pandemic, and Putin's war, having a full Federal Reserve Board has never been more vital.

A few weeks ago, the Senate confirmed Lael Brainard to be Vice Chair of the Board of Governors of the Federal Reserve System. Vice Chair Brainard has served as a member of the Federal Reserve since 2014, when she led bipartisan action to support families through the COVID-19 economic crisis and worked to create a better payments system that works for consumers and small banks. She has championed efforts to modernize and strengthen the Community Reinvestment Act, a landmark civil rights law to start to undo the dark legacy brought on by Jim Crow and, ultimately, redlining. We saw her tremendous efforts pay off. Last week, all three Federal banking Agencies moved forward with their new, historic CRA proposal.

Earlier this week, Democrats supported the historic nomination of Dr. Lisa Cook, who is a prominent economist with years of research and international experience on monetary policy, banking, and financial crises. She is the first Black woman to serve on the Board of Governors in the 109-year history of the Federal Reserve. She has seen how economic policy affects all kinds of people in different parts of the country, from the rural South where she grew up in Milledgeville, GA, to the industrial Midwest at Michigan State University—one of the great Midwestern State universities of this country—where she built her career.

Dr. Cook is a Spelman College alumna. She was a Marshall Scholar and a Truman Scholar. She studied at Oxford University. She earned her Ph.D. in economics at Berkeley. She is a tenured professor of economics and international relations at Michigan State.

Last night, the Senate confirmed Dr. Philip Jefferson, one of the country's leading thinkers on the economics of poverty. He will be a critical voice on the Fed. He is the vice president for academic affairs, dean of faculty, and Freeland professor of economics at Davidson College. He began his career as a Fed economist. He grew up, as he