

(i) One co-chairperson shall be appointed, and may be removed, by the majority leader of the Senate.

(ii) One co-chairperson shall be appointed, and may be removed, by the minority leader of the Senate.

(B) TERM.—The term of a member as a co-chairperson of the Commission shall end on the last day of the Congress during which the member is appointed as a co-chairperson, unless the member ceases being a member of the Senate, leaves the Commission, resigns from the position of co-chairperson, or is removed.

(C) PUBLICATION.—Appointments under this paragraph shall be printed in the Congressional Record.

(D) VACANCIES.—Any vacancy in the position of co-chairperson of the Commission shall be filled in the same manner in which the original appointment was made.

(b) COMMISSION STAFF.—

(1) COMPENSATION AND EXPENSES.—

(A) IN GENERAL.—The Commission is authorized, from funds made available under subsection (c), to—

(i) employ such staff in the manner and at a rate not to exceed that allowed for employees of a committee of the Senate under section 105(e)(3) of the Legislative Branch Appropriation Act, 1968 (2 U.S.C. 4575(e)(3)); and

(ii) incur such expenses as may be necessary or appropriate to carry out its duties and functions.

(B) EXPENSES.—

(i) IN GENERAL.—Payments made under this subsection for receptions, meals, and food-related expenses shall be authorized only for actual expenses incurred by the Commission in the course of conducting its official duties and functions.

(ii) TREATMENT OF PAYMENTS.—Amounts received as reimbursement for expenses described in clause (i) shall not be reported as income, and the expenses so reimbursed shall not be allowed as a deduction under the Internal Revenue Code of 1986.

(2) DESIGNATION OF PROFESSIONAL STAFF.—

(A) IN GENERAL.—Each co-chairperson of the Commission may designate 1 professional staff member.

(B) COMPENSATION OF SENATE EMPLOYEES.—In the case of the compensation of any professional staff member designated under subparagraph (A) who is an employee of a Member of the Senate or of a committee of the Senate and who has been designated to perform services for the Commission, the professional staff member shall continue to be paid by the Member or committee, as the case may be, but the account from which the professional staff member is paid shall be reimbursed for the services of the professional staff member (including agency contributions when appropriate) out of funds made available under subsection (c).

(C) DUTIES.—Each professional staff member designated under subparagraph (A) shall—

(i) serve all members of the Commission; and

(ii) carry out such other functions as the co-chairperson designating the professional staff member may specify.

(c) PAYMENT OF EXPENSES.—

(1) IN GENERAL.—The expenses of the Commission shall be paid from the Contingent Fund of the Senate, out of the account of Miscellaneous Items, upon vouchers approved jointly by the co-chairpersons (except that vouchers shall not be required for the disbursement of salaries of employees who are paid at an annual rate of pay).

(2) AMOUNTS AVAILABLE.—For any fiscal year, not more than \$200,000 shall be expended for employees and expenses.

(d) SUNSET.—This section shall cease to have force or effect on January 1, 2029.

SENATE RESOLUTION 122—RECOGNIZING THE CONTRIBUTIONS OF AMERICORPS MEMBERS AND ALUMNI AND AMERICORPS SENIORS VOLUNTEERS IN THE LIVES OF THE PEOPLE AND COMMUNITIES OF THE UNITED STATES

Mr. CASSIDY (for himself, Mr. COONS, Ms. COLLINS, Ms. BALDWIN, Mr. DURBIN, Mr. HEINRICH, Ms. HIRONO, Mr. KING, Ms. KLOBUCHAR, Mr. LUJÁN, Mr. REED, and Mrs. SHAHEEN) submitted the following resolution; which was referred to the Committee on Health, Education, Labor, and Pensions:

S. RES. 122

Whereas 32 years ago Congress established the Corporation for National and Community Service, now known as AmeriCorps—

(1) to unite national service programs under 1 agency;

(2) to create service opportunities that strengthen communities; and

(3) to expand pathways to education, careers, and civic participation for those who serve;

Whereas, since their inceptions, AmeriCorps and AmeriCorps Seniors national and community service programs have proven to be highly effective ways—

(1) to unite and engage the people of the United States in meeting a wide range of local and national needs;

(2) to promote greater civic engagement; and

(3) to provide pathways to education and careers;

Whereas each year 200,000 individuals serve in AmeriCorps and AmeriCorps Seniors at nearly 40,000 locations across the United States to give back in an intensive way to communities, States, territories, Tribal nations, and the United States;

Whereas AmeriCorps and AmeriCorps Seniors funds have been invested in nonprofit, community, educational, and faith-based organizations, as well as local governments and Tribal nations, and those funds have—

(1) leveraged hundreds of millions of dollars in outside funding and in-kind donations each year; and

(2) expanded the capacity of local and national programs to deliver on missions that strengthen the communities of the United States;

Whereas AmeriCorps members and AmeriCorps Seniors volunteers have provided millions of hours of service across the United States, helping—

(1) to improve the lives of the most vulnerable people of the United States;

(2) to protect the environment;

(3) to contribute to public safety;

(4) to respond to disasters and public health emergencies;

(5) to strengthen the educational system of the United States; and

(6) to expand economic opportunity for all;

Whereas service in AmeriCorps promotes bridge-building, collaboration, and leadership skills, and AmeriCorps programs bring the people of the United States together from different backgrounds, generations, and geographic locations;

Whereas AmeriCorps funds, conducts, and disseminates research on the civic health of the United States and the return on taxpayer investment in national service programs;

Whereas AmeriCorps members and AmeriCorps Seniors volunteers recruit and supervise millions of community volunteers, demonstrating the value of AmeriCorps as a powerful force for encouraging people to become involved in community service;

Whereas, for more than 5 decades, millions of AmeriCorps Seniors volunteers in the

RSVP, Foster Grandparent, and Senior Companion programs have played an important role in strengthening communities by sharing their experience, knowledge, and accomplishments with the individuals they serve;

Whereas, over the past 30 years, nearly 1,300,000 individuals have taken the AmeriCorps pledge to “get things done for America” by becoming AmeriCorps members through the AmeriCorps State and National, AmeriCorps VISTA, and AmeriCorps NCCC programs;

Whereas AmeriCorps members throughout the United States, in return for completing their service terms, have earned more than \$4,500,000,000 to use to further their own educational advancement and career readiness at colleges and universities across the United States;

Whereas AmeriCorps is a proven pathway to employment, providing members with valuable career skills, experience, and contacts to prepare them for the 21st-century workforce;

Whereas leaders across political parties and ideologies recognize the value that national service provides to their communities and country, leveraging the power of AmeriCorps members and AmeriCorps Seniors volunteers to meet the most urgent and pressing needs;

Whereas national service programs have engaged millions of people in the United States in results-driven service in the most vulnerable communities of the United States including in rural, urban, and suburban communities, providing hope and help to individuals with economic and social needs; and

Whereas AmeriCorps Week, observed from March 9 through March 15, 2025, is an appropriate time for the people of the United States—

(1) to salute current and former AmeriCorps members and AmeriCorps Seniors volunteers for their positive impact on the lives of people in the United States;

(2) to thank the community partners of AmeriCorps and AmeriCorps Seniors for making the programs possible;

(3) to encourage more people in the United States to become involved in service and volunteering; and

(4) to celebrate the lasting impact of AmeriCorps and AmeriCorps Seniors programs over the last 30 years: Now, therefore, be it

*Resolved*, That the Senate—

(1) encourages the people of the United States to join in a national effort—

(A) to salute AmeriCorps members and alumni and AmeriCorps Seniors volunteers; and

(B) to raise awareness about the importance of national and community service;

(2) acknowledges the significant accomplishments across a 30-year history of the volunteers, members, alumni, and community partners of AmeriCorps and AmeriCorps Seniors;

(3) recognizes the important contributions made by AmeriCorps members and alumni and AmeriCorps Seniors volunteers to the lives of the people of the United States; and

(4) encourages individuals of all ages to consider opportunities to serve in AmeriCorps and AmeriCorps Seniors.

SENATE CONCURRENT RESOLUTION 9—EXPRESSING SUPPORT FOR THE RECOGNITION OF MARCH 10, 2025, AS “ABORTION PROVIDER APPRECIATION DAY”

Ms. HIRONO (for herself, Mr. PETERS, Mr. BLUMENTHAL, Mr. BOOKER, Ms. DUCKWORTH, Mr. FETTERMAN, Mr. HEINRICH, Mrs. MURRAY, Mr. PADILLA, Ms.

WARREN, Mr. WELCH, Mr. WYDEN, and Mr. MARKEY) submitted the following concurrent resolution; which was referred to the Committee on Health, Education, Labor, and Pensions:

S. CON. RES. 9

Whereas March 10 has been established as a day to show appreciation for the essential, high-quality care that abortion providers and all staff provide to their communities and those traveling to their communities, and to celebrate their courage, compassion, and dedication to their work;

Whereas March 10 was selected for “Abortion Provider Appreciation Day” in honor of Dr. David Gunn, who was killed on March 10, 1993, outside his abortion clinic in Pensacola, Florida, by a White supremacist and anti-abortion extremist in the first known instance of the murder of an abortion provider;

Whereas abortions are provided in-person and through telehealth by facilities such as independent clinics, Planned Parenthood health care centers, hospitals, and private offices of doctors, and all of the staff working at those facilities are essential to ensuring patients receive needed care;

Whereas, on June 24, 2022, the Supreme Court of the United States erroneously overturned *Roe v. Wade*, 410 U.S. 113 (1973), in *Dobbs v. Jackson Women’s Health Organization*, 597 U.S. 215 (2022) (referred to in this preamble as “the Dobbs decision”), reversing decades of legal precedent affirming the right to an abortion and unleashing devastation on an already precarious abortion access landscape;

Whereas States across the United States have moved to restrict access to abortion care, and 19 States have banned some or all access to an abortion as of March 2025;

Whereas, because of State abortion bans and restrictions, scores of clinics and health care centers in already underserved areas and maternal health deserts have closed, forcing more patients to remain pregnant against their will or to travel out-of-State for abortion care, increasing wait times, straining already thin resources, and pushing people farther and farther away from their homes;

Whereas abortion providers and all staff play a critical role in a world where it has become increasingly difficult for individuals to receive essential and time-sensitive care once those individuals have made decisions that are right for their bodies, lives, and futures;

Whereas abortion providers and all staff help to ensure that all individuals who can become pregnant can make their own decisions about their bodies and their pregnancies, and support the decisions of their patients by treating them with dignity, empathy, compassion, and respect, despite numerous challenges due to abortion bans and restrictions;

Whereas abortion providers and all staff play an essential role within the reproductive justice framework, which was created by 12 Black women in 1994, who formulated a human rights framework that demands every person has the human right to bodily autonomy, which includes the right to choose if, when, and how to have children and the right to parent children in safe and sustainable communities;

Whereas individuals seeking abortion care across the United States also rely on the work of abortion funds and practical support organizations to access abortion care for themselves and their families;

Whereas abortion funds and practical support organizations that rely on donations face increasing demand following the Dobbs decision as individuals are forced to travel longer distances, find childcare or lodging,

and raise money to cover the ever-increasing costs of an abortion and wraparound support;

Whereas the network of abortion funds, clinics, providers, and supporters that work to ensure access to abortion is being strained beyond capacity;

Whereas restrictions on abortion care have far-reaching consequences that deepen existing inequities and worsen health outcomes for pregnant people, people giving birth, and their families;

Whereas people who are denied abortion care are more likely to experience high blood pressure and other serious medical conditions during the end of pregnancy, remain in relationships where interpersonal violence is present, and experience poverty;

Whereas research shows that States that have more abortion restrictions are also States that have poorer maternal health outcomes;

Whereas the effects of the Dobbs decision were immediate and disastrous, with 12 States completely banning access to abortion care as of March 2025;

Whereas more than 25,000,000 women of reproductive age, plus more trans and non-binary people, do not have access to abortion where they live;

Whereas restricting and banning access to abortion care—

(1) limits the ability of current and future providers to obtain necessary education and training in abortion care;

(2) exposes the remaining abortion providers and all staff to increased levels of harassment, violence, and politically motivated restrictions; and

(3) creates and increases the out-of-pocket costs and logistical burdens that patients face to get care to a level that is sometimes insurmountable, forcing patients to remain pregnant;

Whereas the 2022 Violence and Disruption Report of the National Abortion Federation found an alarming escalation in incidents of obstruction, vandalism, and trespassing at abortion clinics, with abortion providers reporting an alarming rate of death threats and threats of harm, and documented 218 of such incidents in 2022;

Whereas Black, indigenous, and other providers and patients of color face heightened levels of threats, harassment, and violence as compared to their White counterparts;

Whereas the current administration has emboldened individuals and groups to continue to harass and threaten the ability of abortion providers and all staff to serve their patients;

Whereas the Dobbs decision has emboldened antiabortion individuals and groups to continue to harass providers and the patients they care for;

Whereas the Dobbs decision threatens the ability of abortion providers and all staff to serve their patients; and

Whereas, in the face of multifaceted attacks on their work, abortion providers remain an essential and valued part of their communities, providing high-quality, compassionate, and necessary health care, and courageously delivering that care despite pressures, restrictions, political interference, and violent threats to their personal safety: Now, therefore, be it

*Resolved by the Senate (the House of Representatives concurring), That Congress—*

(1) recognizes “Abortion Provider Appreciation Day” on March 10, 2025, to celebrate the courage, compassion, and high-quality care that abortion providers and staff offer to patients and their families across the United States;

(2) lauds communities across the United States who are proud to be home to abortion providers and staff;

(3) affirms the commitment of Congress to ensuring the safety of abortion providers, the ability of abortion providers to continue providing the essential care their patients need, and the right of patients to access abortion care no matter where they live, free from fear of violence, criminalization, or stigma;

(4) condemns the decisions of the Supreme Court of the United States, as well as the actions of the current administration and anti-abortion extremists, to limit and stigmatize abortion care, which has had a devastating impact on abortion providers and the communities they care for, threatening the work and livelihoods of providers and staff, and worsening the strain on providers who work in States where abortion is still available; and

(5) declares a vision for a future liberated from all abortion restrictions and bans, where everyone has full access to the care they need without fear of penalty or stigma, and affirms the commitment of Congress to working toward that goal in partnership with providers, patients, advocates, and their communities.

#### AMENDMENTS SUBMITTED AND PROPOSED

SA 1237. Mr. THUNE (for Mr. GRASSLEY) proposed an amendment to the bill S. 331, to amend the Controlled Substances Act with respect to the scheduling of fentanyl-related substances, and for other purposes.

SA 1238. Mr. LUJAN submitted an amendment intended to be proposed by him to the bill S. 331, supra; which was ordered to lie on the table.

SA 1239. Ms. BLUNT ROCHESTER submitted an amendment intended to be proposed by her to the bill S. 331, supra; which was ordered to lie on the table.

SA 1240. Ms. CORTEZ MASTO submitted an amendment intended to be proposed by her to the bill S. 331, supra; which was ordered to lie on the table.

SA 1241. Ms. CORTEZ MASTO submitted an amendment intended to be proposed by her to the bill S. 331, supra; which was ordered to lie on the table.

SA 1242. Mr. COONS submitted an amendment intended to be proposed by him to the bill S. 331, supra; which was ordered to lie on the table.

SA 1243. Mr. COONS submitted an amendment intended to be proposed by him to the bill S. 331, supra; which was ordered to lie on the table.

SA 1244. Mr. SCOTT of Florida (for himself and Mr. WELCH) submitted an amendment intended to be proposed by him to the bill S. 331, supra; which was ordered to lie on the table.

#### TEXT OF AMENDMENTS

**SA 1237.** Mr. THUNE (for Mr. GRASSLEY) proposed an amendment to the bill S. 331, to amend the Controlled Substances Act with respect to the scheduling of fentanyl-related substances, and for other purposes; as follows:

In section 5(a)(1), strike “6” and insert “7”.

**SA 1238.** Mr. LUJAN submitted an amendment intended to be proposed by him to the bill S. 331, to amend the Controlled Substances Act with respect to the scheduling of fentanyl-related substances, and for other purposes; which was ordered to lie on the table; as follows: