REPORT ON RESOLUTION PROVIDING FOR CONSIDERATION OF H.R. 1633, FARM DUST REGULATION PREVENTION ACT OF 2011

Mr. WEBSTER, from the Committee on Rules, submitted a privileged report (Rept. No. 112–317) on the resolution (H. Res. 487) providing for consideration of the bill (H.R. 1633) to establish a temporary prohibition against revising any national ambient air quality standard applicable to coarse particulate matter, to limit Federal regulation of nuisance dust in areas in which such dust is regulated under State, tribal, or local law, and for other purposes, which was referred to the House Calendar and ordered to be printed.

HOUR OF MEETING ON TOMORROW

Mr. WEBSTER. Mr. Speaker, I ask unanimous consent that when the House adjourns today, it adjourn to meet at 9 a.m. tomorrow.

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

There was no objection.

ELECTING A MEMBER TO A CERTAIN STANDING COMMITTEE OF THE HOUSE OF REPRESENTATIVES

Mr. BECERRA. Mr. Speaker, by direction of the Democratic Caucus, I offer a privileged resolution and ask for its immediate consideration.

The Clerk read the resolution, as follows:

H. RES. 486

Resolved, That the following named Member be and is hereby elected to the following standing committee of the House of Representatives:

COMMITTEE ON THE JUDICIARY.—Mr. Polis.

Mr. BECERRA (during the reading). Mr. Speaker, I ask unanimous consent that the resolution be considered as read and printed in the RECORD.

The SPEAKER pro tempore (Mr. RENACCI). Is there objection to the request of the gentleman from California?

There was no objection.

The resolution was agreed to.

A motion to reconsider was laid on the table.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, the Chair will postpone further proceedings today on the motion to suspend the rules on which a recorded vote or the yeas and nays are ordered, or on which the vote incurs objection under clause 6 of rule XX.

Any record vote on the postponed question will be taken later.

SYNTHETIC DRUG CONTROL ACT OF 2011

Mr. PITTS. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 1254) to amend the Controlled Substances Act to place synthetic drugs in Schedule I, as amended.

The Clerk read the title of the bill.

The text of the bill is as follows:

H.R. 1254

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 ''Synthetic Drug Control Act of 2011''.

SEC. 2. ADDITION OF SYNTHETIC DRUGS TO SCHEDULE I OF THE CONTROLLED SUBSTANCES ACT.

(a) CANNABIMIMETIC AGENTS.—Schedule I, as set forth in section 202(c) of the Controlled Substances Act (21 U.S.C. 812(c)) is amended by adding at the end the following:

''(d)(1) Unless specifically exempted or unless listed in another schedule, any material, compound, mixture, or preparation which contains any quantity of cannabimimetic agents, or which contains their salts, isomers, and salts of isomers whenever the existence of such salts, isomers, and salts of isomers is possible within the specific chemical designation.

''(2) In paragraph (1):

''(A) The term 'cannabimimetic agents' means any substance that is a cannabinoid receptor type 1 (CB1 receptor) agonist as demonstrated by binding studies and functional assays within any of the following structural classes:

''(i) 2-(3-hydroxycyclohexyl)phenol with substitution at the 5-position of the phenolic ring by alkyl or alkenyl, whether or not substituted on the cyclohexyl ring to any extent.

''(ii) 3-(1-naphthoyl)indole or 3-(1-naphthylmethane)indole by substitution at the nitrogen atom of the indole ring, whether or not further substituted on the indole ring to any extent, whether or not substituted on the naphthoyl or naphthyl ring to any extent.

''(iii) 3-(1-naphthoyl)pyrrole by substitution at the nitrogen atom of the pyrrole ring, whether or not further substituted in the pyrrole ring to any extent, whether or not substituted on the naphthoyl ring to any extent.

''(iv) 1-(1-naphthylmethylene)indene by substitution of the 3-position of the indene ring, whether or not further substituted in the indene ring to any extent, whether or not substituted on the naphthyl ring to any extent.

''(v) 3-phenylacetylindole or 3-benzoylindole by substitution at the nitrogen atom of the indole ring, whether or not further substituted in the indole ring to any extent, whether or not substituted on the phenyl ring to any extent.

''(B) Such term includes—

''(i) 5-(1,1-dimethylheptyl)-2-[(1R,3S)-3-hydroxycyclohexyl]-phenol (CP-47,497);

''(ii) 5-(1,1-dimethyloctyl)-2-[(1R,3S)-3-hydroxycyclohexyl]-phenol (cannabicyclohexanol or CP-47,497 C8-homolog);

''(iii) 1-pentyl-3-(1-naphthoyl)indole (JWH-018 and AM678);

''(iv) 1-butyl-3-(1-naphthoyl)indole (JWH-073);

''(v) 1-hexyl-3-(1-naphthoyl)indole (JWH-019);

''(vi) 1-[2-(4-morpholinyl)ethyl]-3-(1-naphthoyl)indole (JWH-200);

''(vii) 1-pentyl-3-(2-methoxyphenylacetyl)indole (JWH-250);

''(viii) 1-pentyl-3-[1-(4-methoxynaphthoyl)]indole (JWH-081);

''(ix) 1-pentyl-3-(4-methyl-1-naphthoyl)indole (JWH-122);

''(x) 1-pentyl-3-(4-chloro-1-naphthoyl)indole (JWH-398);

''(xi) 1-(5-fluoropentyl)-3-(1-naphthoyl)indole (AM2201);

''(xii) 1-(5-fluoropentyl)-3-(2-iodobenzoyl)indole (AM694);

''(xiii) 1-pentyl-3-[(4-methoxy)-benzoyl]indole (SR-19 and RCS-4);

''(xiv) 1-cyclohexylethyl-3-(2-methoxyphenylacetyl)indole (SR-18 and RCS-8); and

''(xv) 1-pentyl-3-(2-chlorophenylacetyl)indole (JWH-203).''.

(b) OTHER DRUGS.—Schedule I of section 202(c) of the Controlled Substances Act (21 U.S.C. 812(c)) is amended in subsection (c) by adding at the end the following:

''(18) 4-methylmethcathinone (Mephedrone).

''(19) 3,4-methylenedioxypyrovalerone (MDPV).

''(20) 3,4-methylenedioxymethcathinone (methylone).

''(21) Naphthylpyrovalerone (naphyrone).

''(22) 4-fluoromethcathinone (flephedrone).

''(23) 4-methoxymethcathinone (methedrone; Bk-PMMA).

''(24) Ethcathinone (N-Ethylcathinone).

''(25) 3,4-methylenedioxyethcathinone (ethylone).

''(26) Beta-keto-N-methyl-3,4-benzodioxyolybutanamine (butylone).

''(27) N,N-dimethylcathinone (metamfepramone).

''(28) Alpha-pyrrolidinopropiophenone (alpha-PPP).

''(29) 4-methoxy-alpha-pyrrolidinopropiophenone (MOPPP).

''(30) 3,4-methylenedioxy-alpha-pyrrolidinopropiophenone (MDPPP).

''(31) Alpha-pyrrolidinovalerophenone (alpha-PVP).

''(32) 6,7-dihydro-5H-indeno-(5,6-d)-1,3-dioxol-6-amine) (MDAI).

''(33) 3-fluoromethcathinone.

''(34) 4'-Methyl-α-pyrrolidinobutiophenone (MPBP).''.

SEC. 3. TEMPORARY SCHEDULING TO AVOID IMMINENT HAZARDS TO PUBLIC SAFETY EXPANSION.

Section 201(h)(2) of the Controlled Substances Act (21 U.S.C. 811(h)(2)) is amended—

(1) by striking ''one year'' and inserting ''2 years''; and

(2) by striking ''six months'' and inserting ''1 year''.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Pennsylvania (Mr. PITTS) and the gentleman from New Jersey (Mr. PALLONE) each will control 20 minutes.

The Chair recognizes the gentleman from Pennsylvania.

GENERAL LEAVE

Mr. PITTS. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days in which to revise and extend their remarks and insert extraneous materials in the RECORD.

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

There was no objection.

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

H.R. 1254 was introduced by my friend and colleague from Pennsylvania, Representative CHARLIE DENT, in response to a frightening trend of synthetic drug use in our communities. These synthetic drug substitutes, made from chemical compounds that are sold legally in most States, mimic the hallucinogenic and stimulant properties of drugs like marijuana, cocaine, and methamphetamines. While these synthetic drugs are just as dangerous as their traditional counterparts, they are not illegal.

Many families and young people in our communities do not realize the destructiveness of these synthetic drugs because of their legal status and their

wide availability and often harmless-sounding names such as ''Bath Salts'' and ''Plant Food,'' both cocaine substitutes.

H.R. 1254 would, first, ban synthetic drugs that imitate marijuana, cocaine, and methamphetamines; and, second, allow the Drug Enforcement Administration to temporarily schedule a new substance for up to 3 years. Currently, DEA can only temporarily schedule a substance for up to 18 months.

I would like to thank Congressman DENT for working with the DEA on this important issue, and I would urge my colleagues to support this commonsense and bipartisanly supported legislation.

I reserve the balance of my time.

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

I am pleased to support H.R. 1254, the Synthetic Drug Control Act. This bill enjoys bipartisan support and is aimed to eliminate commercial availability of harmful synthetic narcotics. Under this proposal, hallucinogenic drugs would no longer be able to hide behind misleading aliases.

During committee consideration, I was quite alarmed to hear some of the stories shared by the bill's sponsor, Representative CHARLIE DENT, as well as other Members. Around the country, constituents have been able to utilize synthetic products to the detriment of their mental and physical health and, in some cases, costing them their lives.

Unfortunately, these imitation drugs are not illegal, and there is a critical need to strengthen the Federal Government's ability to keep these harmful and dangerous drugs off the street. The Synthetic Drug Control Act adds specific synthetic versions of drugs of abuse to Schedule I of the Controlled Substances Act. These designer drugs mimic some of the effects of drugs such as marijuana and can be very unsafe, causing convulsions, anxiety attacks, and dangerously elevated heart rates, among other conditions.

Under current authority, the Drug Enforcement Agency has difficulty taking action against these drugs because they've been designed to fall outside existing statutory descriptions of Schedule I drugs. H.R. 1254 will enable the Drug Enforcement Agency to take appropriate enforcement actions to get them off the street and away from our Nation's youth.

Mr. Speaker, I urge my colleagues to vote in support of this legislation, and I hope the way we work together on it can prove a model for our efforts on future legislation.

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

Mr. PITTS. I yield 5 minutes to the prime sponsor of the legislation, the gentleman from Pennsylvania (Mr. DENT).

Mr. DENT. I certainly appreciate the support of Mr. PITTS and Mr. PALLONE for their leadership on this issue. It's deeply appreciated.

This issue of synthetic or designer drugs was first brought to my attention by a woman, a mother in my district whose son had been abusing legal substitutes for marijuana. These synthetic cannabinoids, as they're referred to, or synthetic marijuana, affect the brain in a manner similar to marijuana, but can actually be even much more harmful.

Synthetic marijuana, or cannabinoids, are just one category of designer drugs. Even more potent substances have properties similar to cocaine, methamphetamine, LSD, and other hard street drugs. These substances are marketed as innocent products like bath salts, plant food, incense, and they're sold under brand names familiar to their users, such as K2 Spice, Vanilla Sky, or Ivory Wave. However, these are total misnomers designed to facilitate their legal sale. These drugs have no legitimate purpose, period.

H.R. 1254, the Synthetic Drug Control Act, drafted in consultation with Federal law enforcement, has three principal components:

First, a prohibition of broad structural classes of synthetic marijuana or the cannabinoids;

Two, a prohibition of synthetic stimulants and other designer drugs, such as bath salts, mephedrone, MDPV, C2E, et cetera, several of those;

Third, an expansion of the DEA's existing authority to temporarily ban a new substance from 1½ to 3 years. Under current law, if the DEA and Department of Health and Human Services can prove that a substance is, one, dangerous and, two, lacking legitimate value while it is temporarily banned, the prohibition will become permanent.

Over the past year there's been a sharp increase in the number of new reports detailing horrific stories of individuals high on synthetic drugs. A man in Scranton, Pennsylvania, stabbed a priest, and another jumped out a three-story window, both high on bath salts. Several deaths from West Virginia to Florida to Pennsylvania to Iowa have been attributed to abuse of synthetic drugs.

Senator CHUCK GRASSLEY of Iowa has introduced a companion bill with provisions very similar to H.R. 1254, named after one of his young constituents who tragically took his own life while high on synthetic marijuana.

□ 1740

A man in my district was arrested this past May for firing a gun out of his window in a university neighborhood. Police charges indicate that he injected himself with bath salts, and he later told police he thought there were people on the roof watching him.

Finally, I was approached by another distraught mother from my district whose son was hospitalized for over 2 weeks after suffering liver failure and other complications after injecting himself with bath salts. These substances pose a substantial risk, both to the physical health of the user as well as to the safety of those around them when these drugs contribute to dangerous, psychotic behavior, suicide, and public endangerment.

The fact that these drugs are legal in many States contributes to the misconception that they are safe. And the use of easily recognizable brand names and logos on the packaging promotes the concept of a consistent product.

Significant variations of potency from one unit to the next have led recurrent users to inadvertently overdose. One of the major difficulties in combating these designer drugs is the ability of the producers to skirt the law with different chemical variations. By modifying the formula in some minor way, producers can generate a new compound which circumvents legal prohibitions but has similar narcotic events. DEA needs enhanced authority to temporarily schedule new variations when they hit the market, and they usually hit Europe first, and then they enter the United States.

A growing number of States, including Pennsylvania, have enacted bans on many forms of synthetic drugs, but Federal action is necessary to prevent these drugs from being obtained by simply crossing State lines or, increasingly, ordering them over the Internet.

I believe over 30 States have passed bans, if my memory serves me correctly. State-by-State differences in which individual substances are controlled and how strongly makes for a confusing legal patchwork, and Federal legislation certainly will facilitate enforcement.

The U.S. Department of Justice announced its support of H.R. 1254 as amended by the House Judiciary Committee in a letter dated September 30, 2011, and I would submit that for the RECORD.

I also want to point out, too, that the American College of Emergency Physicians, which notes the devastating physical and psychotic effects of these drugs, has also endorsed this bill, and I think that's quite significant as well.

Finally, go to a hospital like Children's Hospital of Philadelphia—they'll tell you they get a case every day with individuals who are suffering from these particular drugs. A year ago at this time, they probably got no calls. And now every day, and that's not just typical in Philadelphia but throughout the country. I urge my colleagues to support this legislation.

You will also hear some folks here today who might actually argue that medical research will somehow be impeded. Nothing could be further from the truth. This legislation does not in any way impede medical research. I would be happy to get into that at some point.

U.S. DEPARTMENT OF JUSTICE,
OFFICE OF LEGISLATIVE AFFAIRS,
Washington, DC, September 30, 2011.

Hon. F. JAMES SENSENBRENNER, Jr.,
Subcommittee on Crime, Terrorism, and Homeland Security, Committee on the Judiciary, House of Representatives, Washington, DC.

DEAR MR. CHAIRMAN. This letter provides the Department of Justice's views on H.R.

1254, as amended by the Committee on Energy and Commerce, titled the ''Synthetic Drug Control Act of 2011.'' The bill would amend the Controlled Substances Act (CSA) to address the growing use and misuse of synthetic drugs by placing a number of substances in schedule I and by extending the length of time that a drug may be temporarily placed in schedule I.

We support the bill as drafted, but believe it can be strengthened with the addition of the ''2C family'' of drugs listed in an appendix to this letter and in S. 839. The Department also supports the goals of S. 605, Dangerous Synthetic Drug Control Act of 2011 or the ''David Mitchell Rozga Act''; S. 839, Combating Designer Drugs Act of 2011; and S. 409, Combating Dangerous Synthetic Stimulants Act of 2011. H.R. 1254 already contains many provisions included in S. 605 and S. 409, and we urge that the bill be expanded to include the provisions of S. 839.

THE THREAT OF SYNTHETIC DRUGS

In recent years, a growing number of dangerous products have been introduced into the U.S. marketplace. Products labeled as ''herbal incense'' have become increasingly popular, especially among teens and young adults. These products consist of plant materials laced with synthetic cannabinoids which, when smoked, mimic the deleterious effects of delta-9- tetrahydrocannabinols (THC), the principal psychoactive constituent in marijuana. To underscore the scope and breadth of the synthetic cannabinoid problem, a recent report prepared by the United Nations Office on Drugs and Crime (UNODC) notes that more than 100 such substances have been synthesized and identified to date.''

There is also growing evidence demonstrating the abuse of a number of substances labeled as ''bath salts'' or ''plant foods'' which, when ingested, snorted, smoked, inhaled, or injected, produce stimulant and other psychoactive effects. These synthetic stimulants are based on a variety of compounds and are purported to be alternatives to the controlled substances cocaine, amphetamine, and Ecstasy (MDMA). These drugs have been distributed and abused in Europe for several years and have since appeared here in the United States. According to a recent National Drug Intelligence Center report, poison control centers and medical professionals around the country have reported an increase in the number of individuals suffering adverse physical effects associated with abuse of these drugs.

There are other newly developed drugs that also pose a significant threat to the public. This includes the ''2C family'' of drugs (dimethoxyphenethylamines), which are generally referred to as synthetic psychedelic/hallucinogens. Recently, a 19-year-old male in Minnesota died of cardiac arrest after allegedly ingesting 2C–E, one of the substances within this class of drugs. We note that the 2C substances listed in the attached Appendix are included in the list of substances covered by S. 839. The Department supports the addition of the 2C family of substances listed in the Appendix to H.R. 1254.

Products containing synthetic drugs are dangerous and represent a growing challenge to law enforcement. Apart from the wide array of harmful or even lethal side effects of many of the listed substances, neither the products nor their active ingredients have been approved by the Food and Drug Administration for use in medical treatment, and manufacturers and retailers of the products containing these substances do not disclose that there are synthetic drugs in their products. Synthetic drug abusers may endanger not only themselves but others: some become violent when under the influence of these substances, and abusers who operate motor vehicles after using synthetic drugs likely present similar dangers as those under the influence of controlled substances.

With the exception of the five substances recently controlled by the Drug Enforcement Administration (DEA) pursuant to its temporary scheduling authority, the listed synthetic cannabinoids and synthetic stimulants are not currently in any schedule under the CSA.

EFFORTS TO CONTROL SYNTHETIC DRUGS

Congress created an interagency process for placing new and emerging drugs into one of five schedules of the CSA (21 U.S.C. 811 et seq.). One such mechanism, temporary scheduling (21 U.S.C. 811(h)), was specifically designed to enable the Department to act in an expeditious manner if such action is necessary to avoid an imminent hazard to the public safety. In response to the growing threat posed by known synthetic cannabinoids, on March 1, 2011, the DEA temporarily placed the following five synthetic cannabinoids in schedule I: JWH–018, JWH–073, JWH–200, CP–47, 497, and CP–47, 497 C8 homologue.

The DEA is currently gathering scientific data and other information about synthetic cathinones as well as evaluating their psychoactive effects to support administrative action to schedule these substances under the CSA. To temporarily schedule these stimulants, the DEA must find that placement in schedule I is necessary to avoid an imminent hazard to the public safety, a finding that requires the DEA to consider the following three factors: history and current pattern of abuse; the scope, duration, and significance of abuse; and what, if any, risk there is to the public health, including actual abuse; diversion from legitimate channels; and clandestine importation, manufacture, or distribution. Once data have been gathered to meet the statutory criteria to temporarily schedule these cathinones, the Department will initiate an action to temporarily place them into schedule 1. In fact, on September 8, 2011, the DEA published a notice of intent in the Federal Register (21 FR 55616) to temporarily place mephedrone, methylone and MDPV in schedule I.

Unfortunately, however, the distribution and abuse of synthetic drugs cannot be fully addressed by temporary scheduling because as law enforcement investigates, researches, and develops evidence to support such action, illicit drug makers create new synthetic drugs for the purpose of evading federal law. Scheduling via legislation is an additional tool to promote public health and safety.

PURPOSE OF LEGISLATION

Placing synthetic carnnabinoid and synthetic stimulant substances in schedule I would expose those who manufacture, distribute, possess, import, and export synthetic drugs without proper authority to the full spectrum of criminal, civil, and administrative penalties, sanctions, and regulatory controls. Unless authorized by the DEA, the manufacture and distribution of these substances, and possession with intent to manufacture or distribute them, would be a violation of the CSA and/or the Controlled Substances Import and Export Act.

H.R. 1254, as well as S. 409, would amend the CSA by expanding the list of substances in schedule I of the CSA (21 U.S.C. 812(c)). To address synthetic cannabinoid abuse, the bill names 15 unique substances that would be placed in schedule I; this list includes those temporarily scheduled by the DEA. Additionally, the bill creates five structural classes of substances collectively referred to as ''cannabimimetic agents.'' In order for a substance to be a cannabimimetic agent, the substance must: (1) bind to the CB1 receptor; and (2) meet any of the definitions for those structural classes. If both criteria are met, that substance will be a schedule I cannabimimetic agent controlled substance.

To address emerging synthetic stimulant abuse, H.R. 1254 names 17 unique substances that would be placed in schedule I. These substances have either been encountered by law enforcement here in the United States or are most likely to be encountered by law enforcement in the United States based on their use and misuse in Europe, which is likely where the use and misuse originated.

Finally, the bill seeks to double the amount of time allowed for the Department to temporarily schedule new and emerging drugs by amending 21 U.S.C. 811(h). In this regard, the bill seeks to enhance the tools available to the Department to combat the abuse of new drugs that will appear in the future.

For these reasons, the Justice Department supports H.R. 1254 and recommends that the Committee consider strengthening it in the ways we have proposed.

Thank you for the opportunity to present our views. The Office of Management and Budget has advised us that from the perspective of the Administration's program, there is no objection to the submission of this letter.

Sincerely,

RONALD WEICH,
Assistant Attorney General.

APPENDIX

Additional Synthetic Drugs for Inclusion in section 202(c) of the Controlled Substances Act (21 U.S.C. 812(c)):

Redline of H.R. 1254, as amended by Energy and Commerce on July 28, 2011—

''(35) 2-(2,5-Dimethoxy-4-ethylphenyl) ethanamine(2C-E).

(36) 2-(2,5-Dimethoxy-4-methylphenyl) ethanamine (2C-D).

(37) 2-(4-Chloro-2,5-dimethoxyphenyl) ethanamine (2C-C).

(38) 2-(4-lodo-2,5-dimethoxyphenyl) ethanamine (2C-I).

(39) 2-[4-(Ethylthio)-2,5-dimethoxyphenyl] ethanamine (2C-T-2).

(40) 2-[4-(lsopropylthio)-2,5-dimethoxyphenyl -[ethanamine (2C-T-4).

(41) 2-(2,5-Dimethoxyphenyl)ethanamine (2C-H).

(42) 2-(2,5-Dimethoxy-4-nitro-phenyl) ethanamine (2C-N).

(43) 2-(2.5-Dimethoxy-4-(n)-propylphenyl) ethanamine (2C-P).''

Mr. PALLONE. Mr. Speaker, I yield 1 minute to the gentleman from Maine (Mr. MICHAUD).

Mr. MICHAUD. I thank the gentleman for yielding.

Mr. Speaker, I rise today as a cosponsor and a strong supporter of this bill. The spread of synthetic drugs like bath salts has quickly reached crisis levels in many communities throughout our country. This year in Maine, the Bangor Police Department has responded to hundreds of bath salts-related incidents.

In October, I organized a meeting of local, county, State, and Federal law enforcement officials to discuss the spread of bath salts in our State. The message they shared with me was clear, and the message they shared with the ONDCP Deputy Director Ben Tucker was also clear: We need to give our law enforcement officers more tools to combat this epidemic.

While Maine has banned bath salts, a national law will build upon that good work and help make this a bigger impact all across the country. So I urge my colleagues to support the Synthetic Drug Act.

Mr. PITTS. Mr. Speaker, I yield 2 minutes to the gentlelady from Florida, Congresswoman SANDY ADAMS, who was formerly in law enforcement.

Mrs. ADAMS. Thank you, Congressman PITTS.

Mr. Speaker, in October 2010, a 31-year-old Texas man hanged himself in the bedroom. At the top of his suicide note the man wrote, ''Thanks, bath salts.''

January 2011 in Panama City, Florida, a daughter tried to attack her sleeping mother with a machete before fleeing the scene. Police said she had spent several days taking drug-altered bath salts.

June, 2011, a 38-year-old Army sergeant murdered his wife and killed himself following a police chase. Both had chemically altered bath salts in their systems. Later in the day, the couple's 5-year-old son was found dead with a plastic bag over his head and bruises on his body.

Horrific cases just like these have been documented across the country. These incidents led many States, including my home State of Florida, to outlaw these often dangerous and deadly substances.

Earlier this year, I introduced legislation to add MDPV and mephedrone, chemicals added to bath salts to induce a drug high, to Schedule I of the Controlled Substances Act. These substances are not marketed for human consumption.

It also is why I have joined Representative CHARLIE DENT in his work to bring H.R. 1254, which includes a bill I introduced in April, to the floor today. You have heard no research can be conducted if this passes, but those claims are false. It can be conducted. Research is being done and will continue to be done on Schedule I chemicals. Just listen to the ER doctors and the poison control centers that have both asked for this bill, that both want this bill to save lives.

Too many lives have been lost and too many violent acts have been already committed due to these drugs. These dangerous substances are being packaged and marketed to our children by using innocuous names like Ivory Snow, Bliss, and Vanilla Sky. Today I urge support for H.R. 1254. Let's get the substances off the streets and out of the hands of our children.

Mr. PALLONE. Mr. Speaker, I yield the balance of my time to the gentleman from Virginia (Mr. SCOTT), a member of the Committee on the Judiciary.

The SPEAKER pro tempore. Without objection, the gentleman from Virginia will control the time.

There was no objection.

Mr. SCOTT of Virginia. I thank the gentleman for yielding, and I yield myself 2½ minutes.

Mr. Speaker, this bill will place over 40 chemical compounds on Schedule I of the Controlled Substances Act at a time when only eight of these substances can even be found in the United States. And it does so in a way that circumvents the normal process, that skirts scheduling substances, and does so without any scientific or medical research or evidence to support it.

Congress has a process for placing substances on drug schedules. The Criminal Code sets forth a process that the Attorney General and the Secretary of Health and Human Services must engage in to determine the propriety of scheduling substances. The Secretary must conduct a scientific and medical evaluation and provide recommendations about whether the substances being analyzed need to be controlled. And this needs to be a scientific study, not a compilation of anecdotes.

In this there is a mechanism for addressing emergencies. In the case where the Attorney General on his own determines that there is an emergency, the Code provides that substances may be placed on Schedule I for up to 1½ years while the evidence is being developed to permanently schedule them.

Moreover, the Judiciary Committee during our consideration received numerous statements from pharmaceutical and medical researchers imploring us not to hamper their ability to determine possible medical uses of these substances by placing them on Schedule I, which makes it illegal to possess these substances without a permit even for research purposes.

This includes promising research on the cure for Parkinson's disease that would be compromised by this bill. Now, even with a permit, the restrictions placed on researchers once they are placed on Schedule I are unduly onerous. So there are legal uses of these substances.

Mr. Speaker, when Congress established a process for the Secretary and the Attorney General to do their due diligence and study the propriety of placing substances on Schedule I, we've had a very thoughtful process. And if we want to establish good crime policy, we need to follow that thoughtful process. H.R. 1254 circumvents that process. For these reasons, I urge a ''no'' vote on H.R. 1254.

I reserve the balance of my time.

□ 1750

Mr. PITTS. Mr. Speaker, I yield 4 minutes to the gentleman from Iowa, Congressman TOM LATHAM.

Mr. LATHAM. I thank the chairman and the ranking member for this opportunity today.

Mr. Speaker, I rise in support of H.R. 1254, the Synthetic Drug Control Act. This bill addresses an alarming danger to our kids that many American families may not be aware of.

Many American teenagers are experimenting with synthetic drugs that supposedly mimic the effects of marijuana or other types of drugs. These products, known as K2, Pure Evil, Cloud Nine, and other names, can often be bought legally at convenience stores or at so-called ''head shops'' where they're passed off as incense or bath salts. In reality, the users of these substances can experience unexpected anxiety attacks, extreme paranoia, hallucinations, and thoughts of suicide; and the users are at serious risk of harming themselves.

Our experience with this issue in the State of Iowa illustrates why a Federal ban on these dangerous substances is so important. A year and a half ago yesterday, 18-year-old David Rozga, from Indianola, Iowa, shot himself after taking K2. In response to the tragedy, David's parents, Mike and Jan, have led a campaign to outlaw synthetic drugs like K2. They testified before Congress about the dangers of the drug and enlisted the help of their elected Representatives in cracking down on the sale and abuse of these substances.

My colleagues, we must act on this issue to protect our kids. And the time is now. The threat posed by synthetic drugs is dangerous, and it's growing. In the past 2 weeks alone, there have been several cases where teens have been injured or hospitalized after taking synthetic drugs. In Polk County, three teens were involved in a high-speed crash after smoking one of these substances. In central Iowa, a teenage boy was hospitalized after taking synthetic drugs. He became violently ill—having seizures, vomiting, and hallucinations.

I really want to thank the Rozga family for their selfless willingness to relive the tragedy they've experienced, and I want to thank them for their efforts to prevent other families from experiencing the same heartbreak. This legislation and other efforts to address this threat to our children would simply not have occurred without the Rozgas' courage, strength, and leadership.

I am heartened today that Congress has listened to their message and is taking action. It is time to recognize how dangerous these substances are and to ban their sale in the United States by clarifying their status as Schedule I controlled substances. As a cosponsor of H.R. 1254, I urge my colleagues to support the passage of this most important piece of legislation.

Mr. SCOTT of Virginia. Mr. Speaker, I yield 2 minutes to the gentlelady from California (Ms. ZOE LOFGREN).

Ms. ZOE LOFGREN of California. We are all opposed to the damage that these drugs can do to the American people, but I have to express my opposition to this bill.

My concern about the bill is its effect on scientific research. When a drug is placed on Schedule I of the Controlled Substances Act, it becomes difficult to obtain not only for illegal purposes but for researchers who wish to study its pharmaceutical and medical potential. While this may be justified for some

drugs, it isn't a restriction that should be implemented rashly. That's because it becomes very difficult for scientists to get permission to obtain these molecules even for the scientific study that we need.

For example, in the United States, only 325 researchers have been able to obtain Schedule I licenses at this moment. Congress established the procedure for scheduling drugs, and it requires a scientific and medical evaluation. This bill would bypass that process rather than relying on scientific and medical experts. I've heard from faculty from a range of universities, and they've shared their concerns about the impact.

Here is what Warren Heideman, Ph.D., professor of pharmaceutical sciences and associate dean for Research, School of Pharmacy, at the University of Wisconsin-Madison writes:

''The bill is an irrational, simplistic response to a social problem of great complexity. As such, the world will get significantly less medical and technical help with a low probability of helping anyone with a substance abuse issue. The list is too broad and does seriously restrict what would otherwise be important and easy experiments. Paperwork problems are already a serious campus concern.''

The SPEAKER pro tempore. The time of the gentlewoman has expired.

Mr. SCOTT of Virginia. I yield the gentlelady an additional minute.

Ms. ZOE LOFGREN of California. Here is what Dr. Neal Benowitz, M.D., the chief of the Division of Clinical Pharmacology at the University of California, San Francisco, writes:

''While we support restrictions on the sale of these chemicals for purposes of illicit use . . . scheduling so as to impede access to precursor chemicals in small quantities has the potential to seriously hamper medical research. On balance, the faculty are against this measure.''

John Arnold, the faculty director of the Berkeley Center for Green Chemistry, writes:

''This effort is well-intentioned, but it will cause more problems than it solves.''

We are all against drugs that harm our people; but we had no hearings in the Judiciary Committee on this, and I think the placing of these molecules on Schedule I is evidence of that lack of scholarship. These drugs need to be controlled, but they need to be controlled in such a way that there is no harm done to the vital scientific and medical research that we count on.

I join the gentleman from Virginia in urging a ''no'' vote on this bill in the hopes that we can come back with a measure that accomplishes the worthy goals without doing damage to scientific research, which will save so many lives.

Mr. PITTS. Mr. Speaker, I yield 2 minutes to the gentleman from Pennsylvania, a former prosecutor, Congressman PAT MEEHAN.

Mr. MEEHAN. I rise in support of H.R. 1254 for the very practical reason that, as a prosecutor, I have seen the impact of what can be done when children are lured into the false promise, into the sense that somehow, because it's synthetic, it doesn't present the same kind of danger as the drugs that are often believed to be the most dangerous—the heroins, the cocaines. These are luring kids into a false sense of security.

As has been suggested, this evidence isn't anecdotal. I have had the chance to visit an emergency department at one of the leading children's hospitals in the Nation where we have seen a dramatic rise in families who are being affected because their children are coming in and are under the control of these synthetic substances. For that reason, the American College of Emergency Physicians supports this bill.

Lastly, I think we have it backwards. If what we're trying to say is that somehow we've got to let these children be exposed while we wait with the potential that there could be research done, the fact of the matter is I have worked with pharmaceutical companies and with the DEA to be able to get access to drugs that have been held under control. That can be done in working with the DEA. That's the solution. It's not the solution to put our kids at risk.

Mr. SCOTT of Virginia. Mr. Speaker, I yield 5 minutes to the gentleman from Tennessee (Mr. COHEN).

Mr. COHEN. I appreciate the gentleman from Virginia for yielding the time.

I rise in opposition to this particular bill. It's not that I am, indeed, in favor of any of the particular drugs that are here; but just like Mrs. ADAMS, my colleague from Florida mentioned, the State of Florida has already criminalized it, as many States have, and it's really a State issue.

It seems interesting. When the subject du jour comes up, the item of the day, there is a rush to action and a rush to forget States' rights. There is a desire on gun bills to overlook the States and to have a Federal law on the interstate shipment of guns or on the interstate transportation of guns by people with permits. In this situation, drugs that should be criminalized are criminalized at the State level, but all of a sudden we're doing it more at the Federal level.

This bill would place more than 40 chemical compounds on Schedule I, the most punitive and restrictive schedule, without any independent scientific evidence that doing so is necessary or warranted. It is a rush to legislate before we know all the facts.

This bill essentially bans these substances without any study whatsoever. I've read the press reports of young people who have been harmed by these substances and by others, and I'm very sympathetic as that's certainly wrong; but we shouldn't legislate on the basis of anecdotal evidence. It's typical of the ''shoot first and ask questions later'' approach that we have taken to drug policy in this country for decades.

Our national drug policy should be driven by science, not politics. We've already gotten a well-deserved reputation here as a do-nothing Congress; but bills like this and our attitudes towards clean air, clean water, global climate change, and other environmental issues have made this the no-respect-for-science Congress as well.

□ 1800

The DEA has already taken steps to temporarily place certain synthetic substances on Schedule I while it conducts a review. If there is an emergency that requires temporarily scheduling the other substances in this bill, the DEA can review them and do that just as well.

But we shouldn't circumvent the process established in law. I don't think this is a responsible way to legislate. I know the sponsors of this bill know about the emergency review process because the bill doubles the length of time a bill can be put on emergency review on a schedule from 18 months to 3 years; it doubles it. Yet there's been no hearings or evidence that 18 months was insufficient, none whatsoever. It was just a knee-jerk way to respond to the issue du jour.

This is a very serious issue and deserves serious study and consideration before we act, as all bills before Congress should. I fear that this bill continues the misguided policies that we've created towards drugs in this country.

Just look at our experience with marijuana, which Congress placed on Schedule I in 1970. According to the criteria of the Controlled Substances Act, it supposedly has a high potential for abuse, has no currently accepted medical use in treatment in the United States, and there is a lack of accepted safety for use of the drug under medical supervision.

Let's put aside for a minute the question of whether it has a potential for abuse. Certainly there's a lot of evidence that it does not. But I think thousands of people who depend on marijuana to treat the effects of such diseases as AIDS, cancer, glaucoma, and multiple sclerosis would take issue with the notion that it has no medical use, and 15 or so States have legalized it for medical use. It increases appetite and eases pain in a way that has helped countless people in the last stages of life.

But we treat our approach to drugs as a law enforcement matter, not a scientific matter, and we've placed marijuana in Schedule I, the most restrictive schedule. Meanwhile, the scientific community is urging that we reschedule marijuana so we can continue to conduct important research and make it available to those in need.

Recently, the California Medical Association called for cannabis to be legalized and regulated, primarily so

that scientists can gain access to it and conduct further research. They advocated wider clinical research with accountable and quality-controlled production of cannabis. None of this can happen with the tight restrictions we've placed on cannabis. That's exactly the situation we may find ourselves in with the substances named in this bill.

I know that licenses are available for research in the Schedule I drugs, but there's no reason to make researchers go through such hoops. It is nearly as easy to get permission to do research on a Schedule I drug as it would be to go to the Vatican and ask for a grant to study birth control.

We don't know what medical benefits these substances may contain and we don't know the true risk they pose. Perhaps they belong in a lower schedule. And Schedule II would certainly deter young people from using them and others and set a penalty stage. But we have no idea. We just decided to throw the book and make it Schedule I.

Perhaps they shouldn't be scheduled at all. I suspect they should be scheduled, maybe Schedule II. But the scientists should decide this and not politicians. We have no basis to believe they belong in Schedule I. Haven't we learned from this Nation's 40-year experiment with the war on drugs?

Prohibition does not work. It is an expensive and counterproductive policy that fills up our prisons and places a mark on our citizens that can make jobs, housing, and education nearly impossible to obtain. We should focus our efforts on educating young people about the substances and continue to do research about their benefits and risks.

Instead of basing our drug policy on science, we are letting it be driven by politics. This bill continues that trend, and regrettably I must urge its defeat. We need to send this bill back to committee and take a careful, considerable review so that we can have Congress make this decision on a scientific basis with help from the scientists.

The SPEAKER pro tempore. The time of the gentleman has expired.

Mr. SCOTT of Virginia. I yield the gentleman 1 additional minute.

Mr. COHEN. The DEA can use its emergency powers to temporarily schedule these substances while letting the scientific process play out. Let's put science first and politics second. Let's defeat this bill.

If we put science first and politics second, maybe we won't be in single figures in the public's mind as an organization that they support as an institution. Part of the 9 percent level is because we do things sometimes in a rush to judgment and politics and the issue du jour rather than allowing the scientific process and doing what is logically best for our Nation to prevail.

I urge the defeat of this bill.

Mr. PITTS. Mr. Speaker, may I inquire how much time remains on each side?

The SPEAKER pro tempore. The gentleman from Pennsylvania has 6½ minutes remaining, and the gentleman from Virginia has 6 minutes remaining.

Mr. SCOTT of Virginia. Mr. Speaker, I tell my colleague that I am prepared to close.

Mr. PITTS. I yield 1 minute to the gentleman from Pennsylvania (Mr. MARINO), a former prosecutor.

Mr. MARINO. Thank you, Chairman.

Mr. Speaker, I recently coauthored a letter with my colleagues, Representative SANDY ADAMS and Representative TREY GOWDY, concerning this very issue, and I'd like to read just a paragraph:

''As of October 4, 2011, the DEA has 325 researchers conducting research with Schedule I controlled substances. These researchers include research centers and universities who seek to better understand the effects of Schedule I controlled substances. Additionally, as of October 4, 2011, the DEA has 3,983 active registrants who manufacture, research, and conduct chemical analysis with Schedule I controlled substances.

''In fact, many researchers who would conduct research to better understand the compounds controlled in H.R. 1254 are already registered with the DEA, which means there would be virtually no impact on ongoing research.''

Mr. Speaker, as a former prosecutor for 18 years at the State and local level, I have seen firsthand the disaster this drug causes.

The SPEAKER pro tempore. The time of the gentleman has expired.

Mr. PITTS. I yield the gentleman an additional 30 seconds.

Mr. MARINO. I have seen firsthand what this drug does. If it doesn't kill our children, it makes them suicidal; it makes them incredibly violent.

And I still get calls, as a former prosecutor, from hospitals and emergency service personnel telling me the violence that a child under this influence causes, not only on him- or herself, but emergency personnel. Therefore, I ask my colleagues to support this legislation.

Mr. SCOTT of Virginia. Mr. Speaker, I had another speaker that arrived unexpectedly.

Mr. PITTS. I reserve the balance of my time.

Mr. SCOTT of Virginia. I yield 2 minutes to the gentleman from Illinois (Mr. DAVIS).

Mr. DAVIS of Illinois. I want to thank the gentleman from Virginia for yielding.

I rise in opposition to the proposed multistate mortgage settlement currently being negotiated between the country's major mortgage servicers and the State attorney generals.

Before we haphazardly rush into a settlement, we need to pause for what I call station identification, so to speak.

I'm speaking on the wrong bill.

But I also rise in opposition to the synthetic drug bill. I think there is not enough research. I think there's information still needed. I don't think that we are in a position to allow this action to take place, and so I join in opposition to passage of this legislation.

Mr. PITTS. I am prepared to close; so I continue to reserve the balance of my time.

Mr. SCOTT of Virginia. Mr. Speaker, in closing, this bill circumvents the normal thoughtful process for scheduling drugs. Most of the drugs in this bill can't even be found in the United States. And to the extent there is an emergency and a need to place these on a schedule, the Attorney General has the emergency process where he can just put a drug on the schedule for a year and a half.

Medical researchers have asked us not to pass the bill because it will disturb promising research, particularly on Parkinson's disease, and so they have asked us not to pass this bill.

We should follow the thoughtful process for scheduling drugs and defeat this bill.

I yield back the balance of my time.

Mr. PITTS. Mr. Speaker, I yield the balance of my time to the prime sponsor of the bill, the gentleman from Pennsylvania (Mr. DENT).

Mr. DENT. I do want to address a few of the statements I heard on the floor from my friends from Tennessee and Virginia.

My friend from Tennessee made some comments, but I want to be very clear, these drugs are dangerous, have a high potential for abuse and no accepted medical use, which is why they belong on Schedule I. Schedules II and V are reserved for drugs used in legitimate medical procedures.

So we're talking about Schedule I here, not Schedules II through V. Let me be very clear on that point.

□ 1810

Second, the FDA has stated that the drugs listed in H.R. 1254 have no medical use, and there are no INDs—that is, investigational new drug applications—for these substances pending with the FDA. This is from the FDA. H.R. 1254 will not prevent further research into synthetic drugs. It's simply false to say that it will.

DEA has a routine, well-established procedure in place to facilitate scientific study of Schedule I drugs, including marijuana, cocaine, and heroin. Currently the DEA has licensed nearly 4,000 individuals and other entities, including universities, manufacturers, researchers, and labs to handle Schedule I drugs for scientific and investigational purposes. These are facts.

I also want to point out, my friend from Virginia made some comments about I guess eight compounds having been found in the United States. Actually, dozens of compounds have been found in the United States. Many bath salt chemicals currently are in the United States, but only three synthetic stimulants and five synthetic cannabinoids have been emergency

scheduled by the DEA because they have to go chemical by chemical in order to act on this matter. They have to deal with this on a chemical-by-chemical basis.

We need Congress to give the DEA authority to be more effective and get ahead of this problem. We know that these drugs are coming into this country from Europe. That's where they're coming from, these compounds. There are some in Europe right now. Our goal is to get out in front of this before they have a chance to be exported into the U.S.

Another comment I heard about 325 researchers, well, 325 researchers because that's all who have applied to do this type of research. DEA is not in the business of turning researchers away, so I want to be clear on these points.

There's so much more that can be said on this. But again, research will not be impeded in any way. There is a mechanism, there is a process in place to do research on these Schedule I drugs. It's well established. This has nothing to do with the medical marijuana debate. I heard that argued earlier, too. We're talking about synthetic marijuana and synthetic cocaine. This stuff is dangerous. And, in fact, some would argue worse than the real stuff, so let's get to it.

This is about public safety. This is about the health of our constituents. We know what's going on. In fact, somebody pointed out to me today that a store in Washington, D.C., a few blocks from the Capitol, somebody is selling this stuff. My State and over 30 other States have seen this problem. They know what's happening across this country. We need to do something about it. DEA is alarmed by this. Justice is on board. DEA is on board. Let's do something for the good of the American people. Please pass H.R. 1254, the Synthetic Drug Control Act of 2011. It's in the best interest of the American people, and the best interest of our children. We're doing the right thing.

Mr. WAXMAN. Mr. Speaker, the Synthetic Drug Control Act adds specified synthetic versions of drugs of abuse to Schedule I of the Controlled Substances Act. These designer drugs generally mimic the effects of marijuana or of stimulants and can be unsafe, causing convulsions, anxiety attacks, dangerously elevated heart rates, and bizarre and dangerous behavior, among other conditions. Under current authority, the Drug Enforcement Administration (DEA) has difficulty taking action against these drugs because they fall outside existing statutory descriptions of Schedule I drugs. H.R. 1254 will enable DEA to take appropriate enforcement actions to get them off the street and away from our Nation's youth. I therefore believe it is critical that we deal with the threat these drugs pose.

I wish to note however that I have concerns with the basic underlying statute that would now apply to these listed substances through this legislation. In particular, I do not support the mandatory minimum sentencing provisions of the Controlled Substances Act for Schedule I drugs, provisions that under this legislation will apply to the listed synthetic drugs as they apply to all Schedule I drugs. Mandatory minimum sentencing inappropriately applies a one size fits all approach, eliminating the ability of judges to exercise discretion in determining an appropriate sentence in light of individual circumstances. The sentencing judge is in the best position to determine a fair sentence, having considered all of the evidence and having heard from the parties and the defendant.

I also believe that the administrative process for scheduling controlled substances should be improved, so that the Attorney General, with the help of the Secretary of Health and Human Services, can make scheduling decisions without resorting to help from Congress. I do not know whether such improvement requires legislation or regulation. I do know, however, that it is rarely a good idea for Congress to make scientific determinations such as are required to make good scheduling decisions.

Additionally, I believe it is incumbent upon DEA to reevaluate the recordkeeping and other regulatory requirements it imposes upon scientists who use controlled substances for legitimate research. The agency should ensure that such research is not impeded or discouraged through unnecessarily onerous requirements.

I recognize that it is not a simple task to strike the right balance, to exercise enough control to discourage abuse but not so much as to discourage research that may lead to important therapeutic advances and treatments. I intend to send a letter to DEA Administrator Michele Leonhart asking for a report on the restrictions imposed upon researchers, particularly those in academia who work with amounts of scheduled substances too small to pose a serious risk of diversion. I would like to know what if any improvements can be effected to eliminate or modify those requirements whose costs in time and resources outweigh their potential benefits in hindering research scientists from becoming drug abusers. I hope the Chairman of the Energy and Commerce Committee and others will join me on the letter.

Finally, however, while I remain concerned about aspects of the underlying statute, the question before us is whether these substances should be controlled as would be accomplished through passage of this legislation. I believe the answer is yes, because of the danger to public health posed by the listed synthetic drugs.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Pennsylvania (Mr. PITTS) that the House suspend the rules and pass the bill, H.R. 1254, as amended.

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. PITTS. Mr. Speaker, I object to the vote on the ground that a quorum is not present and make the point of order that a quorum is not present.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, further proceedings on this question will be postponed.

The point of no quorum is considered withdrawn.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX, proceedings will resume on motions to suspend the rules previously postponed.

Votes will be taken in the following order:

H.R. 944, de novo;
S. 535, de novo;
H.R. 2360, de novo;
H.R. 2351, de novo;
H.R. 1560, de novo;
S. 683, de novo;
S. Con. Res. 32, de novo.

CALIFORNIA COASTAL NATIONAL MONUMENT CONSOLIDATION ACT

The SPEAKER pro tempore. The unfinished business is the question on suspending the rules and passing the bill (H.R. 944) to eliminate an unused lighthouse reservation, provide management consistency by incorporating the rocks and small islands along the coast of Orange County, California, into the California Coastal National Monument managed by the Bureau of Land Management, and meet the original Congressional intent of preserving Orange County's rocks and small islands, and for other purposes.

The Clerk read the title of the bill.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Washington (Mr. HASTINGS) that the House suspend the rules and pass the bill.

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

A motion to reconsider was laid on the table.

FORT PULASKI NATIONAL MONUMENT LEASE AUTHORIZATION ACT

The SPEAKER pro tempore. The unfinished business is the question on suspending the rules and passing the bill (S. 535) to authorize the Secretary of the Interior to lease certain lands within Fort Pulaski National Monument, and for other purposes.

The Clerk read the title of the bill.

The SPEAKER pro tempore. The question is on the motion offered by the gentleman from Washington (Mr. HASTINGS) that the House suspend the rules and pass the bill.

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

A motion to reconsider was laid on the table.

PROVIDING FOR OUR WORKFORCE AND ENERGY RESOURCES ACT

The SPEAKER pro tempore. The unfinished business is the question on suspending the rules and passing the bill (H.R. 2360) to amend the Outer Continental Shelf Lands Act to extend the