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Economic Stimulus Rebates

On February 7, 2008 Congress approved the “Economic Stimulus Act of 2008.” The legislation was signed into law a week later, and it provides working families, seniors and disabled veterans with a tax rebate check.

Who is eligible for a stimulus check?

Generally, you are eligible if you file your 2007 income tax return reporting a tax liability or have earned income, Social Security income or disabled veterans’ benefits of more than \$3,000. Dependents are not eligible, and the credit phases out for those taxpayers with adjusted gross incomes of more than \$75,000 (\$150,000 for joint returns).

What do you need to file to get a stimulus check?

Most taxpayers simply need to file a 2007 income tax return by April 15th. There is no additional form needed for the stimulus check. The Treasury Department will determine the amount of the check and automatically send it to you.

There are special filing instructions for recipients of Social Security, Railroad Retirement and certain veterans’ benefits. Taxpayers who normally do not file an income tax return will need to file in order to receive a stimulus check. This can be done for free through Free File – Economic Stimulus Payment, which is available at the Internal Revenue Service (IRS) website, www.irs.gov.

When will you receive your check?

Starting May 2, 2008, the Treasury Department expects to begin issuing checks to more than 130 million individuals. This process will be completed by early July. For anyone who files before April 15th, the checks will be sent out in the order of the last two digits of the Social Security number used on the return. For example, filers using direct deposit with Social Security numbers ending in digits “00” through “20,” payment will be transmitted on May 2nd. The full chart and schedule can be found in IRS Notice 2008-44, which is available at www.irs.gov.

Combating Global HIV/AIDS, TB and Malaria

The House this week approved legislation that will extend and expand a key initiative to combat HIV/AIDS, tuberculosis, and malaria around the globe.

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The Lantos-Hyde U.S. Global Leadership Against HIV/AIDS, Tuberculosis, and Malaria Reauthorization was approved by a vote of 308 to 116.

Since the HIV/AIDS epidemic began in 1981, 20 million men, women and children around the globe have died from the disease, with about three-fourths of the deaths occurring in sub-Saharan Africa. Today, there are 40 million people around the globe who are HIV-positive. Each and every day, another 6,000 people become infected with HIV. There is a moral imperative to combat this epidemic.

In May 2003, on a bipartisan basis, the Congress enacted the U.S. Leadership Against HIV/AIDS, Tuberculosis, and Malaria Act – authorizing \$15 billion over five years for U.S. contributions to both bilateral and multilateral efforts. It was based on the President’s Emergency Plan for AIDS Relief (PEPFAR), which he unveiled in January 2003. Over the last five years, this program has been critical, particularly in sub-Saharan Africa – for example, having provided life-saving drugs to almost 1.5 million AIDS patients and having promoted successful programs to prevent the spread of the HIV infection.

This bipartisan bill reauthorizes and expands this key initiative over the next five years – authorizing \$50 billion.

In the first five years of the U.S. response to the global HIV/AIDS epidemic, U.S. policy was driven by the urgency of an emergency response. Under this bill, the U.S. will develop and implement strategies to transition from the emergency phase to long-term sustainability that can be maintained by the host countries.

The bill’s goals include preventing 12 million new HIV infections; providing life-saving drugs for 3 million AIDS patients; providing medical and non-medical care for 12 million people (including 5 million orphans); and training 140,000 new health care workers.

Protecting America’s Children

Beginning last spring, an alarming number of dangerous and sometimes deadly imported consumer products were identified. Reports of Chinese-manufactured toothpaste which contained a dangerous, poisonous chemical used in antifreeze were soon followed by the reports of contaminated, Chinese-manufactured pet food being blamed for causing kidney failure in hundreds of American pets. Soon, additional concerns were raised about Chinese farm-raised seafood, truck and van tires, and chemical and pharmaceutical products.

These disturbing deficiencies were followed by an unprecedented number of consumer recalls for children’s toys and products, largely due to unsafe levels of lead. With more than 80 percent of all toys sold in the United States being made in China, it would be easy to simply blame the problems on China’s poorly regulated export manufacturers. But doing so would be to ignore the regulatory deficiencies, questionable business practices, forces of globalization and lack of Congressional oversight.

All of these instances demonstrated the strains and limitations facing the U.S. Consumer Product Safety Commission (CPSC), which is the federal watchdog charged with protecting the public from unreasonable risks of serious injury or death from more than 15,000 types of consumer products under its jurisdiction.

Despite the enormous growth and increasing complexity of global trade over the past two decades, the CPSC has been largely underfunded. The CPSC now has fewer than half the employees it had in 1980, and its testing laboratory is nothing short of embarrassing. Additionally, the CPSC has had to endure an exodus of experienced and highly competent staff in recent years. This is a shameful situation given that the CPSC bears significant responsibility for protecting America’s children.

With this in mind, Congress has moved toward addressing the issue. In December 2007, the House unanimously approved the Consumer Product Safety Commission Modernization Act, and the Senate passed its version of the bill in March 2008 by a 79 to 13 vote.

Under the bill, the budget for the CPSC would increase from the current \$69 million to \$100 million under the House bill and to \$155 million under the Senate version. The legislation also provides increased funding to modernize the CPSC testing lab; the world’s strongest lead-level standard; mandatory third-party testing for many children’s products; and, tracking labels for children’s products to quicken and simplify the process of identifying of overseas manufacturers and product recalls.

While Congress has been working on this issue, there is great and understandable concern among states that the legislation is not moving fast enough. In fact, there are now lead standard and toy-safety bills pending in more than half of the state legislatures across the country.

While not as strong as the federal standard under consideration, Illinois and Michigan have already enacted new lead laws and Washington may soon follow. And, starting in January, California will become the first state to ban toys and other child-care products that contain more than trace amounts of phthalates.

The immense interest in this issue demonstrates its importance, and reveals how important it is for Congress to act swiftly. Without immediate action by Congress, we risk the chaotic situation of standards that vary from state to state.

In the end, the best course will be for Congress to take the strong and swift lead. There are some differences between the House and Senate versions of the bill that need to be ironed out. One of the most significant differences is the Senate’s call for the creation of a public internet database that would empower the public with information about product safety information. This would allow parents to quickly obtain information about potential dangers to their children.

Congress has a responsibility to help parents to protect their children, so it must act quickly to address the many problems that have come to light in the last year. And, given the overwhelming support for legislation, there is little reason to leave children at risk any longer.