others whose income may be just above that "poverty line"—but to whom medical help is just as important—and yet just as remote.

Dr. ENGLISH. I will tell you what we are going to try to do. I think that particular problem reflects that we are trying to make it basically a local program, that the only people that know how to resolve an extremely difficult question like that are the people that live in that area and the doctors that live in that area. I think if we tried to do that in Washington it would be tough. I just don't think that we can.

I think we can give guidelines to a community but in practice the way this is being resolved is by the people who live in the area where the center is going to be located and by their doctors. Watts is a big area and our center is only going to serve 30,000 people. The local people make the determination of where the first one is to be in coordination with the medical school. We are going to try to keep decisions like that as much a local issue as we possibly can.

Chairman PERKINS. Mr. Goodell, do you have any further questions?

Mr. GOODELL. Yes, Mr. Chairman.

I am not sure whether you put in the record your response to my question that was pending when we recessed.

Mr. SHRIVER. No; we did not put it in. That is the $61 million question.

Dr. ENGLISH. I would be happy to respond now. The $61 million figure is for fiscal 1967; $49 million of that was authorized by the Congress for the comprehensive health services program. In fiscal 1968 the figure is $60 million for the comprehensive health services program.

Mr. GOODELL. Are you advocating that this be earmarked for that purpose?

Dr. ENGLISH. No, sir.

Mr. GOODELL. You are still against earmarking?

Dr. ENGLISH. Yes, sir.

Mr. GOODELL. Once again you are in agreement with the Republican side. I think you are going to be a little embarrassed here soon.

Mr. SHRIVER. I think it is the other way around.

Mr. GOODELL. We have been opposed to earmarking, as you know, and last year opposed it.

Mr. SHRIVER. We felt that way from the beginning. We were not sure that the Republicans had been supporting the whole program so well but I am delighted.

Mr. GOODELL. That raises a question. Mr. Quie indicated that he and I and other Republicans for some time have supported the notion of community action. We certainly support health centers, where a local community action board gives priority to such a center and feels that it should be funded in their area. I was deeply troubled, therefore, to have called to my attention the other day a couple of articles quoting Mr. Shriver as accusing Republicans of being professional throat slitters and doing a professional hatcheting job. It doesn't seem to me that this accusation advances the cause very much. Are those accurate quotes of what you said about Mr. Quie and me and other Republicans?