WITNESS REGISTRATION

Committee Name:_	HREV	/ /					
ر <mark>ublic Hearing on:</mark> _	HB 2572	Date: 2/8/2011					
Please register if you wish	to testify on the above named measure/issue.	Please print legibly.					

Name and Organization <u>or</u> County of Residence	Phone # (Optional)	Do you live more than 100 miles from this meeting location?		Position			Are you submitting written testimony?	
PLEASE PRINT LEGIBLY		Yes	No	For	Against	Neutral	Yes	No
RANDY WALRUFF JED TUMKING WULTHOMCH CTY anette Spickard OSACH			X	X		£	X	
OSACA			X	X				X
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Committee Services

Revised 04/04