WITNESS REGISTRATION

Committee Name:_	HREV	
.⁄ublic Hearing on:_	HB 3009	Date: 3/9/2011

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?			Are you submitting written testimony?			
	PLEASE PRINT LEGIBLY	(0)	Yes	No	For	Against	Neutral	Yes	No
L	LAURIE WIMMER OEA (For all 4 bills)			×	X			×	
V	RALPH GROENER			×	X				X
ب	Acthur Tower SEMLOWER			X	X			×	
					1				

Committee Services

Revised 04/04

WITNESS REGISTRATION

Committee Name:	HREV	-4
ublic Hearing on:	HB 3009	Date: $3/9/2011$

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
/	LAURIE WIMMER OEA (For all 4 bills)			×	×			×	
	RALDH GROENED			×	X			,	X
	Acthur Tower SEMbulson		٠	X	X			\ <u>\</u>	
		s-1				_	2		