Committee Name:_	HREV	17
∠ublic Hearing on:_	HJR 14	Date: $3 - 46 - 2000$
Please register if you wish t	o 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	(Optional)	Yes	No	For	Against	Neutral	Yes	No
5	1-RED YATES	541 258-19118	7	X		X		X	
	David Williams. PPS.			X	×				٦
	MORGAN ALLAN OSBA			7	×			×	
	Agan .								

Committee Services

Revised 04/04

Committee Name:	HREV	157
ublic Hearing on:_	HJR 14.	Date: 3-45-20(1

Please register if you wish to testify on the above named measure/issue.

Please print legibly.

	Name and Organization or County of Residence			Do you live more than 100 miles from this meeting location?		Position			
	PLEASE PRINT LEGIBLY		Yes	No	For	Against	Neutral	Yes	No
	FRED YATES	541 258-19118		X		X		X	
	Tard Williams. PPS			<	X				7
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Committee Name:_	HREV	
ر. ublic Hearing on:_	HJR 14	Date: 3 - 17-H
Please register if you wish to	o 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	(0)	Yes	No	For	Against	Neutral	Yes	No
FRED YATES			×		×		×	
Jame Winner OEA			X	入			X	
Holly Fifield			X	X				X
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Committee Services

Revised 04/04

Committee Name:_	HREV	
ublic Hearing on:_	HJR 14	Date: 3 - 17 - H

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
FRED VATES			×		×		X	
Laurie Winner OEA			X	<u> </u>			X	
Holly Fifield			X	X				X
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Committee Services								ed 04/0