## **PUBLIC RECORD**

Oregon State Legislature

## WITNESS REGISTRATION

Public Hearing on: Committee Name:

Date:

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

Pahel

Please print legibly.

Committee Services		369	Scott Barrie Assoc	Miller Paint	Scot Klas	Cheryl Grabham DER	Palmer Mason DEQ	PLEASE PRINT LEGIBLY	Name and Organization <u>or</u> County of Residence	
				6				Phone # (Optional)		
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Revise					{			Yes	Are you submitting written testimony?	
Revised 04/04		\	\	\		7	7	No	you itting ten tony?	