PUBLIC RECORD

WITNESS REGISTRATION

Oregon State Legislature

Committee Name:_	House Rules	
. ablic Hearing on:_	H) K 15	Date: 4-1-2013

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
Norman Williams Willamette University			\times	\times		,	X	
Leslie Johnson City Club of 20x Mike Sulvaggio								
Mike Sulvaggio						-		
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