PUBLIC RECORD
Oregon State Legislature

WITNESS REGISTRATION

Please register if you wish to testify on the above named measure/issue.		rint legibly.
Public Hearing on: $SB440$	Date:_	4-10-2013
Committee Name: JWM HS		
79F		

Name and Organization <u>or</u> County of Residence PLEASE PRINT LEGIBLY	Phone # (Optional)	Do you live more than 100 miles from this meeting location?		Position			Are you submitting written testimony?	
		Yes	No	For	Against	Neutral	Yes	No
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Committee Services							Panis	ed 04/04