Oregon State Legislature Committee Name: Public Hearing on:

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 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
0	John Van Landing han Shawn Miller			*	*			Ϊ	
	Sybil Hebb Guenn Baldwin			X	* *			X	
5	CINDY ROBORT - RAAGP					X			
9	CINDY ROBORT - RHAGP AMI STEVENS) Landlar Sim HERMAN) Landlar	ds				X			