PUBLIC RECORD

WITNESS REGISTRATION

Oregon State Legislature Committee Name:___ Date: 5/15/13 Public Hearing on: H3

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
ERICH BRILL								_
COMMUNITY VISION			B			8		8
LAURIE BISBY		X		X				
Lili Hoag			X	X			X	
J.L. Wilson - Aor			V					~
Sira Celar				X				
Sira Gelen Dep. Vega Rederson								
Committee Services							Revie	ed 04/04