PUBLIC RECORD
Oregon State Legislature WITNESS REGISTRATION

Committee Name:	Senate Health	n Care of Human Services
Public Hearing on:	HB 2132A	Date: 5/16/13

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
John Hummel Oregon Primary Care Assoc.			X	X			X	
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