PUBLIC RECORD

Oregon State Legislature WITNESS REGISTRATION

CommitteeName:	Louise	Health Care	

Public Hearing on: NB 2118 Date: 3/25/2013

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 #	Do you live more than 100 miles from this meeting location?		Position			Are you submitting written testimony?	
PLEASE PRINT LEGIBLY	(opcional)	Yes	No	For	Against	Neutral	Yes	No
Rose Englert Dregon			X		X			X
Euse Brown								
Arthur Toners			V				V	
Jesu O'Brica OSPIRG			\times	X			X	x
	9							