PUBLIC RECORD

WITNESS REGISTRATION

Oregon State Legislature
Committee Name: House Health Care

Date: 5/17/2013 Public Hearing on: <u>SB 169 A</u>

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
Niki Terzieff -				X				
Novo Nordisk			X					X
Paul Manning-			×	X				X
OR State Alliance of YMCA's								^
Stewart Perry -		, j		X				
KY State Diabetes Advocate		*						X
Elise Brown -				V			Alrea	udy
American Diubetes Assoc.			X	X			sia C	US
							Revie	