## WITNESS REGISTRATION

Committee Name:

Public Hearing on:

Please register if you wish to testify on the above named measure/issue. Please print legibly.

|   | Name<br>and<br>Organization <u>or</u> County of Residence | Phone # (Optional) | Do you live more<br>than 100 miles<br>from this<br>meeting<br>location? |    | Position |         |         | Are you submitting written testimony? |    |
|---|---|--------------------|---|----|----------|---------|---------|---------------------------------------|----|
|   | PLEASE PRINT LEGIBLY                                      |                    | Yes   | No | For      | Against | Neutral | Yes                                   | No |
| 4 | X I rene gilbert  |                    |   |    |          |         | ×       |                                       |    |
|   | X Irene gilbert   |                    | X   |    |          | X       |         | X                                     |    |
| / | Dirabeth Howe<br>Pointrup                                 |                    |   | X  | X        |         |         |                                       | X  |
| 1 | Marion Hayres   | _                  |   | /  | V        |         |         |                                       |    |
|   | OATEY TSAUER<br>NW NATURAL                                |                    |   |    |          |         |         |                                       |    |
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