## **PUBLIC RECORD**

Oregon State Legislature WITNESS REGISTRATION

Committee Name: Schale	Health Care	9 Human	Services
Public Hearing on:	05	Date: 31	21113

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
John Powell			à		X			$\langle$
Lisa Trussell					/			<u> </u>
matthew lacke	0 21 (1996)							
Carol Chautka			8		ŕ			K.
Natil MS Society Migan Hetrerman Multreman				V		U	V	7
John mother Cascade AIDS Project				/			V	
Quin Davingo A, Marthy Postma Michelik Fernand Hernophilin Foundar	ez m of or			V			~	
NANCY HASKIN MOLLY'S FUND CLACKAMAS COUNTY	<i>ii</i>	d <b>#</b> 0		<b>/</b>			/	
MIKEALA FARASYN ON THE PHONE	1			X				×
Anthony Barrons								
	*		9					

Committee Services

MEASURE: SB 165
EXHIBIT: 21
S. HEALTHCARE & HUMAN SERVICES
DATE: 32113 PAGES: \_\_\_\_\_
SUBMITTED BY: 51 off