## WITNESS REGISTRATION

Committee Name: House Rules

Public Hearing on: HCR 32

Date: 6-3-2013

**PUBLIC RECORD** 

**Oregon State Legislature** 

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

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
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Committee Services

Revised 04/04