PUBLIC RECORD

WITNESS REGISTRATION

Oregon State Legislature ouse Ligher Education Committee Name:____

Date: 3-27-2013 Public Hearing on: 48

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 # (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
多David Rives			X					×
David Rives Jim Salt		25	X					×
2								