LADRIC HECORD

Committee Services

Oregon State Legislature WITNESS REGISTRATION

Committee Name:_	Senate Rules	
Public Hearing on:_	HCR 33	Date: 6-19-13
Please register if you wish t	o 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		Position			Are you submitting written testimony?	
PLEASE PRINT LEGIBLY		location? Yes No		For Against Neutral			Yes No	
Seu. Monnes Anderson								
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Revised 04/04