PUBLIC RECORD

Oregon State Legislature

WITNESS REGISTRATION

Public Hearing on: HCR 31 Date: 6-19-1	3
Committee Name: Senate Rules	
## A.	

Name and	Do you live more than 100 miles			Position			Are you submitting_	
Organization <u>or</u> County of Residence PLEASE PRINT LEGIBLY	Phone # (Optional)	from this meeting location?					written testimony?	
		Yes	No	For	Against	Neutral	Yes	No
Andrea Chiapella	61454		X	X				X
			- Advisor was extended to the control of the contro					
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						-		
Committee Services							Revise	ed 04/