Oregon State Legislature
 WITNESS REGISTREE

 Committee Name: General Govt, Consumer, \$ Small Bus. Protection

 SR574

 Date: 3/1/13

PUBLIC RECORD

Please register if you wish to testify on the above named measure/issu

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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
Jim Craven								Y
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