PUBLIC RECORD Oregon State Legislature WITNESS REGISTRATION

Committee Name:	Send	He H	realth Care	47	uman	Selvices
Public Hearing on:	SB	374		_ Date:	3/4/	13

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
OBERON WROLGYDNES BENTO			X	×				X
Grig Miller OASCA			X	X				X
Gwensaylon			*	7				7
DIANA CodujN Oregon Physical Thenapis On Ende pendent PRACTO	ts		X		X	ч		X
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