## PUBLIC RECORD Oregon State Legislature WITNESS REGISTRATION

Committee Name:_	House Judi	ciary	
Public Hearing on:_	5B 55	Date:3	7-13-2015
Please register if you wish	to testify on the above named meas	ure/issue. Please prii	nt 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
Terry Leggent, Senior Judge Onegan State Bar/Crimibal Jury Onegan State Bar/Crimibal Jury		×		×			*	
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