PUBLIC RECORD

WITNESS REGISTRATION

Oregon State Legislature Committee Name: House Judiciary
Public Hearing on: H3 2561

ase register if you wish to testify on the above	e named measu	re/issue.	Plea	ase p	rint l	<u>legib</u>	<u>y.</u>	
Name and Organization <u>or</u> County of Residence PLEASE PRINT LEGIBLY	Phone # (Optional)	Do you live more than 100 miles from this meeting location?		Position			Are you submitting written testimony?	
		Yes	No	For	Against	Neutral	Yes	No
Bruce Miller State Courts							سا	
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