PUBLIC RECORD	WITNESS REGISTRATION	\square
Oregon State Legislature Committee Name:	use duman ervises	Vousing
Public Hearing on:	24777 Date:	3/13/13

Please register if you wish to testify on the above named measure/issue. **Please print legibly.**

RD	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?	
M	PLEASE PRINT LEGIBLY	(Yes	No	For	Against	Neutral	Yes	No
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	Committee Services							Revise	ed 04/04