## PUBLIC RECORD Oregon State Legislature WITNESS REGISTRATION

Committee Name:_	Senate Judiciary	
Public Hearing on:_	58 16	Date: 02/23/2015

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
Dian Bolt			X	X				X
Diane Selt								· ·
BOD VROMAN			<b>\</b>	V				X
Plackames Co Assesson	-		^	_				/ \
Josh Gibson		~		~/				
Diane Belt Bob VROMAN Plackamas Co Assesson Josh Gibson Jockson Co. Assessor  Jan Meekcoms NFIB				X				$\wedge$
Jan Mooll nome			1 6	1				1
NEIR			X	X				X
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Committee Services							Revie	ed 04/0