## **WITNESS REGISTRATION**

**PUBLIC RECORD** Oregon State Legislature

Committee Name:_	Senat	a Health	Can		_	
Public Hearing on:_	SB	606		Date: 3/16/15	_	
Please register if you wish t	o testify o	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
Kellie Barnes			人	X				X
Ocolge Okulich Tracky Dannes Oracl				X				
Doorah Loy Capital Dental			×				×	
LARRY BURNETT	5-03- 221-Ha	3	X	X				×
		7						
Committee Services							Revis	ed 04/04