## **WITNESS REGISTRATION**

**PUBLIC RECORD Oregon State Legislature** 

Committee Name:_	House Committee	on Health Care
Public Hearing on:	SB 152	Date: 03/18/2015

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)  541) 740-4941	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
DAMES HALE, OP OREGON OPTOMETRIC PATSICIANS ASSON			×	×			~	