## WITNESS REGISTRATION

Oregon State Legislature

Committee Name:	HOUSE	REVENUE	VIC(
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Public Hearing on:  $\mathcal{HB}$ Date: 3 26 - 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 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
Mayor	Denny Doyle ty of Beaverton			入	X				X
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Committee Services								Revis	ed 04/0