WITNESS REGISTRATION

Oregon State Legislature

Committee Name:_	SBT	Oregon State Legislature					
Public Hearing on:_	~ W11	Date: 3/25/15					

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
Soleem Moorani Ciquen Store Owner- Steve Annua Liquor Sore Owner-ALSO			X	X				
Steve frown Ligvor Sore Owner-ALSO			X	X				
Marshall Coba Asst. Ligron Stres of OR Patrick Bernards			X	X				
Patrick Bernards			×	X				
Bull Run Distilling Co.			/	/ `				
	-							