WITNESS REGISTRATION

PUBLIC RECORD
Oregon State Legislature

Committee Name:	07/		Oregori State Legislature
Public Hearing	2129	Date:	4.22-6

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 tesimony?	
PLEASE PRINT LEGIBLY		Yes	No	For	Against	Neutral	Yes	No
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Committee Services								ed 04/04