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## WITNESS REGISTRATION

Committee Name: _	Scrole	Hee 1th	Con	
Public Hearing on:	HB Za	34 A		_ Date: _ 5/11/15
Please register if you	u wish to testif	y on the ab	ove-named measure/issue	. Please print legibly.

Name  PRINT LEGIBLY	Organization or County of Residence	Check if you live more than 100 miles from this meeting.	Position on Measure		
			For	Against	Neutral
Panel:					
John Mullin	Oregon Luw Center		X		
Janet Baver	Oregon Center for Public Pul	ILY	人		
Alberto Mureno	Oregon Latino (trait could a		À.		
Knshna Narayun	Asian Pacific American Network of dregon		X		
_					
DOUL BARBER	Oregon Association of Health Underwriters				X