## WITNESS REGISTRATION

PUBLIC RECORD

Oregon State Legislature

Committee Name:_	Joint Ways 3 Means Sub Committee on Education							
Public Hearing on:_	SB 519	Date:	05/28/2015					
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)	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
Jared Mason Gere				+				
			-					
							la Tura Tura Tura	
	,					٣- لا		
							/	
Committee Services							Revise	ed 04/04