MEASURE:

PUBLIC RECORD: This form, your verbal testimony, and max be posted on the Internet and accessible to the public.

WITNESS REGISTRATION

Committee Name: _	House Rules	
Public Hearing on:	SCR 10	Date: 6-3-2015

Please register if you wish to testify on the above-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
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CS001 (rev. 6/2014)					