Committee Name: JWMHS

Public Hearing on:  $\underline{SB}$ 

Date: 6-23-2015

**PUBLIC RECORD** 

**Oregon State Legislature** 

Please register if you wish to testify on the above named measure/issue. **Please print legibly.** 

2110	Pleace	nrint	logihly

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
Melissa Unger			X	X			X	
U U								
							a	

**Committee Services** 

Revised 04/04