PUBLIC RECORD: This form, your verbal testimony, and materials you distribute will be posted on the Internet and accessible to the public.

WITNESS REGISTRATION

Committee Name:	Senate Health	Care					
Public Hearing on:	AB 3439	Date: 5/4/17					
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
Tom Doyle Jenn BAKER	Oregon Nuises Assn'		×		
Jenn BAKER	ana		\sim		
	8				