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## WITNESS REGISTRATION

Committee Name: _	Senat	e Judi	ciay_	
Public Hearing on: _	SB	423	J	Date: 2/12/19
Please register if you	wish to testify	on the above-n	amed 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		
		this meeting.	For	Against	Neutral
Cari Boyd TRoy Clance Vin Ferraris	Dregon state Police	2			X
TRoy Clance	Ovega (tate che; fle		X		
Jim Ferraris	Oregon State Police Oregon State Police Oregon State Police Origon State Police		X		
MICHAEL SELVAGAIO	ORCOPS		W/-1 Areno.		