PUBLIC RECORD: This form, your verbal testimony, an	nd materials you distribut	e will
be posted on the Internet and accessible to the public.	ð.	

## WITNESS REGISTRATION Committee Name: <u>SENATE HEALTH CARE</u> Public Hearing on: <u>SB9</u> Date: <u>2-13-2019</u>

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

	Name	Organization or County of Residence	Check if you live more than 100 miles from	Position on Measure		
	PRINT LEGIBLY		this meeting.	For	Against	Neutral
	Jessica Adamson	Providence		$\times$		
	Kara Campuzano	Manon arinty		$\times$		8
0	Brandi Berger	JDRF		X		
15K	The Clark	TEU Colleger Pha		$\left  \right\rangle$		
7	Lounda Anderen	17 1		$\times$		
	Jim Gord Ner	Ph Rm A		X		
	Niki Terzieff	OR State Phormacy Coalition				
	Else Brown	Attip		4		
	CS001 (rev. 6/2014)					