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## WITNESS REGISTRATION

Committee Name: _	House Health care	
Public Hearing on:	HB 2009	Date: 03/14/2019

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		
A			For	Against	Neutral
Amy tawer Eisc Brown	Hayver Aitipler			X	
JESICALADUMSON	Prov. HOA,			X	×
Jessica Adurnson Mark Griff th	Pior. Port, OSPIRG		X		