

# PUBLIC RECORD

## Oregon State Legislature WITNESS REGISTRATION

Committee Name: JWMED

Public Hearing on: HB 5029 OHSU Date: 4-10-2013

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

| Name and Organization or County of Residence<br><b>PLEASE PRINT LEGIBLY</b> | Phone # (Optional)   | Do you live more than 100 miles from this meeting location? |    | Position |         |         | Are you submitting written testimony? |    |   |
|---|----------------------|---|----|----------|---------|---------|---------------------------------------|----|---|
|   |                      | Yes   | No | For      | Against | Neutral | Yes                                   | No |   |
| <i>1st pls</i><br>BLIND PIECE<br>OMA  | 503-510<br>6019      |   |    |          |         | ✓       |                                       |    | ✓ |
| RYAN Robinson<br>THE OREGON IDEA - MULTNOMAH                                | 503-308<br>0486      |   | ✓  |          |         | ✓       |                                       |    | ✓ |
| Chere Pereira<br>Oregon State Univ  | 541-<br>737-<br>3881 |   | ✓  |          |         | ✓       |                                       |    | ✓ |
| Dani Babbel<br>OHSU medical student   | 511-<br>829-<br>1695 |   | ✓  |          |         | ✓       |                                       |    | ✓ |
| Shanley Deal<br>OHSU medical student  | 253<br>948<br>6920   |   | ✓  |          |         | ✓       |                                       |    | ✓ |
| Ethan Beckley<br>OHSU medical student                                       | 503-<br>277-<br>1085 |   | ✓  |          |         | ✓       |                                       |    | ✓ |
| Sandra McDonough<br>Portland Business Attorney                              | 503<br>8             |   | ✓  |          |         | ✓       |                                       |    |   |
| Iraj Kasimi<br>OHSU Dental Student  |                      |   | ✓  |          |         | ✓       |                                       |    |   |
| George Okulitch<br>GDA  |                      |   |    |          |         | ✓       |                                       |    |   |
| JOE ESMONDS   | -                    |   | ✓  |          |         | ✓       |                                       |    |   |

# PUBLIC RECORD

Oregon State Legislature

## WITNESS REGISTRATION

Committee Name: JWMED

Public Hearing on: HB 5029 OHSU Date: 4-10-2013

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

| Name and Organization or County of Residence<br><b>PLEASE PRINT LEGIBLY</b> | Phone # (Optional) | Do you live more than 100 miles from this meeting location? |    | Position |         |         | Are you submitting written testimony? |    |
|---|--------------------|---|----|----------|---------|---------|---------------------------------------|----|
|   |                    | Yes   | No | For      | Against | Neutral | Yes                                   | No |
| ANDI EASTON, OR. Assoc. of Hospitals & Health Systems                       |                    |   | X  | X        |         |         |                                       | X  |
|   |                    |   |    |          |         |         |                                       |    |
|   |                    |   |    |          |         |         |                                       |    |
|   |                    |   |    |          |         |         |                                       |    |
|   |                    |   |    |          |         |         |                                       |    |
|   |                    |   |    |          |         |         |                                       |    |
|   |                    |   |    |          |         |         |                                       |    |
|   |                    |   |    |          |         |         |                                       |    |
|   |                    |   |    |          |         |         |                                       |    |
|   |                    |   |    |          |         |         |                                       |    |
|   |                    |   |    |          |         |         |                                       |    |
|   |                    |   |    |          |         |         |                                       |    |
|   |                    |   |    |          |         |         |                                       |    |
|   |                    |   |    |          |         |         |                                       |    |