

# PUBLIC RECORD

## Oregon State Legislature WITNESS REGISTRATION

MEASURE: SB 387 A  
 EXHIBIT: 4  
 2013 SESSION HOUSE HEALTH CARE  
 DATE: 5-1-13 PAGES: 18  
 SUBMITTED BY: Staff

Committee Name: House Health Care

Public Hearing on: SB 387 A Date: 5-1-13

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

Name and Organization or County of Residence <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
David Fredrickson LMT OBMT	541 941 2144	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>