PUBLIC RECORD Oregon State Legislature WITNESS REGISTRATION

Committee Name:	Senate Judiciary	
Public Hearing on:	58 88	Date: 3 19 13
Please register if you wish to	testify on the above named measure/issue.	Please print legibly.

Name and Organization <u>or</u> County of Residence	nce Phone # (Optional)	Do you live more than 100 miles from this meeting location?		Position			Are you submitting written testimony?	
PLEASE PRINT LEGIBLY		Yes	No	For	Against	Neutral	Yes	No
Bob Jondeph DRO		9	V			22		/
							1	
*								
						9		
								ed 04/0