

# PUBLIC RECORD

## Oregon State Legislature WITNESS REGISTRATION

Committee Name: JWM Human Services Sub

Public Hearing on: Health Care PEAB PEED OEBB Date: 2-21-2013  
HB 5030 Public Health OEBB

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
Northwest Health Foundation Alejandro Ojeda			<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>	
SCHOOL BASED HEALTH CENTERS PAULIA HESTER			<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>	
Jesse Kennedy OREGON NURSES ASSOCIATION			<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>	
Eric Jones CANCER ACTION NETWORK			<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>	
Commissioner Stern			<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>	
Commissioner Madrell			<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>	
Lila Wickham			<input checked="" type="checkbox"/>				<input checked="" type="checkbox"/>	
Belle Shepherd		<input checked="" type="checkbox"/>						
Muriel DeLaVergne-Brown		<input checked="" type="checkbox"/>						
Kathleen O'Leary			<input checked="" type="checkbox"/>					

Group  
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