WITNESS REGISTRATION $Q \not \subseteq R$

PUBLIC RECORD
Oregon State Legislature

26/14
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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	Phone # (Optional)	Do you live more than 100 miles from this meeting location?		Position			Are you submitting written tesimony?		
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