WITNESS REGISTRATION

Committee Name: House Committee on Consumer Protection and Jovernment

Public Hearing on: HB 1/135 Date: 2 - 6 - 2014

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 testimony?	
	PLEASE PRINT LEGIBLY		Yes	No	For	Against	Neutral	Yes	No
V	Jim Gardner Microsoft			L**					١
	Michael Forder			V.	V	_			V
	Alex Petty			v.	V				r/
	Parl Allen			V	V				V
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Committee Services

Revised 04/04