WITNESS REGISTRATION

PUBLIC RECORD

Oregon State Legislature

Committee Name: HOUSE REVENUE	
Public Hearing on: 4B 4138	Date: <u>2-6-14</u>
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 PLEASE PRINT LEGIBLY	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
Angela Miele MPAA		X		X			X	
Mike Koczko		4		X			X	
Scott Barrie Ellen Miller			X	4				
Ellen Miller				X				X
Oregon Association of Broadcuste								<u> </u>
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