PUBLIC RECORD

Committee Services

WITNESS REGISTRATION

Oregon	State	Legislature	9 01	
Committ	ee Nan	ne V	c	γ

te Judiciary

Public Hearing on: HB

Revised 04/04

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
AGEllen Rosenblown / Elizabotho	xert		X	X		/	X	
Rep. Berger								
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