PUBLIC RECORD

Oregon State Legislature WITNESS REGISTRATION

Committee Name: Shake Education Wholfman Public Hearing on: HB 4/127 H Date: 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
NORGAN ALLEN								
BOTH REYNOLDS			X	X			X	
House Speaker Time Kotek								
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			ă:					

Committee Services

Revised 04/04