WITNESS REGISTRATION

Oregon State Legislature

Committee Name: JWM NK	<u> </u>
Public Hearing on: 53 1514	Date: 2/25/14

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
Steve Lambert Jackson Cty Parks	_	×		X				
Mark Labbart			X	×				
Tills. Comm. Will Tucker, Lynn Cty Com Elizabeth Howe				X				
Elizabeth Howe ORPA	· ·		×	X			X	
					že.			
Committee Services							Pavia	ed 04/04