WITNESS REGISTRATION

PUBLIC RECORD Oregon State Legislature

Committee Name:	Senate Rules			
∠olic Hearing on:	HB 4133 A	Date:	2-25-2014	

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
Steven Welk			X			X		X
× 8								

Committee Services

MEASURE HB 4133 A

EXHIBIT: 15

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