

WITNESS REGISTRATION

PUBLIC RECORD
Oregon State Legislature

Committee Name: House Committee on Health Care

Public Hearing on: HB 2523 Date: 02-16-2015

Please register if you wish to testify on the above named measure/issue. **Please print legibly.**

| Name and Organization or 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 |
| FERN SABoe DC | | | ✓ | X | | | X | |
| Ramona St. George Majoris | | | ✓ | | ✓ | | ✓ | |
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