

WITNESS REGISTRATION

Committee Name: House Committee on Health Care

Public Hearing on: HB 2125 Date: 02/27/2015

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
Tyler MacInnis			✓		✓		✓	
SCOTT EKBLAD OFFICE OF RURAL HEALTH				✓				
DOUG BARBER RURAL HEALTH ASSOC.				✓				
JACK DEMPSEY ONA				✓				
JOSH BALLOCH				✓				
BRYAN BOEHRINGER ONA				✓				
John Mullin OLC H510							✓	✓