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WITNESS REGISTRATION

Committee Name: Senate Health Care

Public Hearing on: SJM 4 Date: 3-2-15

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

Name <i>PRINT LEGIBLY</i>	Organization or County of Residence	Check if you live more than 100 miles from this meeting.	Position on Measure		
			For	Against	Neutral
Pam Martin	AMH (OHA)				<i>see</i>
Cheryl Ramirez	AOCMHP		✓		
Stacy Michaelson	AOC		✓		
JONATHAN EAMES	Eames Consulting ^{OPEBA} Cascadia		✓		
ALEX CUYLER	Lare Co		✓		