WITNESS REGISTRATION

PUBLIC RECORD
Oregon State Legislature

Committee Name: Senate Health Care

Public Hearing on: SB 39 Date: 3/11/15

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
John Mullin Human Service Coalition			X					X