

WITNESS REGISTRATION

Committee Name: House Committee on Health Care

Public Hearing on: HB 3021 Date: 03-13-2015

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
ROBERT H PUNG SR Elders in Action Medford, OR 97530	503 758- 7436		X	X			X	
LEAH Latta PT Partnerships In Community Living	503 732- 9592		X	X				X
BRYAN BOEHRINGER	503 619 8000					X		X
Mary Ann Buffam						X		X
Sarah Baessler, ONA						X		X
Elizabeth Remley CAMBIA								