

WITNESS REGISTRATION

Committee Name: House Committee on Health Care

Public Hearing on: HB 3427 Date: 04/03/2015

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
Aan Murray ^{A Murray} Aan Murray ^{Drug}								
Anne Emmett	503-238-2405		X	X			X	
John Milnes	503-559-6415		X	X			X	
Dave Reinhard	930							
Mack An								
Marc Andrews			X	X				
Caleb Hayes			X	X				
DAVE Reinhard			X	X				
Larry Conner CPC			X	X			X	