

PUBLIC RECORD: This form, your verbal testimony, and materials you distribute will be posted on the Internet and accessible to the public.

WITNESS REGISTRATION

Committee Name: Senate Health Care

Public Hearing on: SB 695 Date: 4/13/15

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
Dr Mike Shirtcliff	Advantage Dental	X	X		
Deborah Loy	Cgato/Dental Care		X		