

PUBLIC RECORD

WITNESS REGISTRATION

Oregon State Legislature
Committee Name: _____

HOUSE REVENUE

Public Hearing on: HB 3086

Date: 4-15-2015

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
JIM SYRING CLACKAMAS COUNTY			X	X				X
CHRIS HAWES Clackamas County			X	X				X