

**WITNESS REGISTRATION**

Committee Name: JWMHS

Public Hearing on: SB 900 Date: 6-8-2015

Please register if you wish to testify on the above named measure/issue. **Please print legibly.**

Name and Organization or County of Residence <b>PLEASE PRINT LEGIBLY</b>	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
Dr Mike Newcomb, Legacy Health D.O.				X				
Kevin Campbell Oregon Hospital Assn				X				
Andrea Salinas for SEIU				✓				
Jesse O'Brien OSPIRG						X		