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**WITNESS REGISTRATION**

Committee Name: Senate Committee on Rules

Public Hearing on: SCR7 Date: 15<sup>th</sup> March 2017

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

| Name<br><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 |
| Scott GALLANT                | GALLANT Policy Advisors             |  | ✓                   |         |         |
| David Walls                  | Osteopathic Physicians              |  | ✓                   |         |         |
| Paige Spence                 | OLCV                                |  | ✓                   |         |         |
| Trevor Beltz                 | OM A                                |  | ✓                   |         |         |
| Rep. Julie Parrish           | HD 37                               |  | ✓                   |         |         |
| Rep Pam Marsh                | HD 5                                |  | ✓                   |         |         |
| Senator Alan Olson           | SD 20                               |  | ✓                   |         |         |
| Ardi Easton                  | OAHHS                               |  | ✓                   |         |         |
| Elise Higley                 | Jackson County                      |  | X                   |         |         |
| Josh Balloch                 | All Care Health                     |  | X                   |         |         |
|                              |                                     |  |                     |         |         |
|                              |                                     |  |                     |         |         |
|                              |                                     |  |                     |         |         |
|                              |                                     |  |                     |         |         |