WITNESS REGISTRATION

Committee Name: Human Services & Housing

Public Hearing on: HB 2011   **Date:** 3/16/17

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

Name PRINT LEGIBLY	Organization or County of Residence	Check if you live more than 100 miles from this meeting.	Position on Measure		
			For	Against	Neutral
GABRIELA SODOLAFARB	OREGON HEALTH AUTHORITY				
RYAN FISHER	MULT.				
Tina Kotek	HD44				

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