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WITNESS REGISTRATION

Committee Name:	HSE. REV.	
Public Hearing on: _	HB 3296	Date: 4-10-17

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

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
Katrina Kedberg	Oregon Health Arthrity				X
Wendy Johnsm	Leased Organ Code)			
Joseph Philpatrick	Tax Payer			X	
Joseph Philpatrick Charle Wyatt	Tax Payer			X	
CapieTueioce	OR NUDE ASSIN		X		
Deanna Mack	DOR				X
	*				