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**WITNESS REGISTRATION**

Committee Name: House Health Care

Public Hearing on: SB 423 Date: 5/10/17

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

Name <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
<i>Lex Bergstein</i>	<i>Zoom + Care</i>		<input checked="" type="checkbox"/>		
<i>Albert Diliberto</i>	<i>" "</i>		<input checked="" type="checkbox"/>		
<i>Thad Mick Thad Mick</i>	<i>" "</i>		<input checked="" type="checkbox"/>		
<i>Bill Cross</i>	<i>OSPA/OSHHP</i>				<input checked="" type="checkbox"/>