

PUBLIC RECORD: This form, your verbal testimony, and materials you distribute will be posted on the Internet and accessible to the public.

WITNESS REGISTRATION

Committee Name: House Judiciary

Public Hearing on: SB 1543 A Date: _____

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
_____ Sexual Assault Forensics _____				<input checked="" type="checkbox"/>	
_____ Psychiatric Security _____					
Sid Moore Kevin Campbell	Chiefs & Sheriffs		<input checked="" type="checkbox"/>		
Doug Barber Christy Lambert	AOCMHP Garvin		<input checked="" type="checkbox"/>		
_____ Prostitution Convictions _____					
Mary Sofia	OCDLA		<input checked="" type="checkbox"/>		

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WITNESS REGISTRATION

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Public Hearing on: SB 1543A Date: _____

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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
_____	Optional Probation		_____		
Mary Sofia	OCDLA		✓		
_____	Batters' Intervention Program				
_____	Inmate Garnishment				
Jeremiah Stromberg	Dept of Corrections		✓		



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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
	-A28	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Aaron Keon	DJS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Amanda Dalton	ODAA	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	-A27	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Senats-Knapp		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mary Sofia	OCIDLA	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Kimberly McCullar	ACLU	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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WITNESS REGISTRATION

Committee Name: House Judiciary

Public Hearing on: SB 1543 A Date: 2-1-14

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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
Swatting					
Prone					
AARON KNOTT	DOT (IF NEEDED)		X		
Conditions of Probation					
AARON KNOTT	DOT (IF NEEDED)		X		
Reduction to "A" Misdemeanor					
Mary Sofia	OCDLA		✓		