

**PUBLIC RECORD**

**WITNESS REGISTRATION**

**Oregon State Legislature**

Committee Name: \_\_\_\_\_

House Health Care

Public Hearing on: \_\_\_\_\_

HB 3407

Date: \_\_\_\_\_

4/5/2013

Please register if you wish to testify on the above named measure/issue.

**Please print legibly.**

Name and Organization or County of Residence <b>PLEASE PRINT LEGIBLY</b>	Phone # (Optional)	Do you live more than 100 miles from this meeting location?		Position			Are you submitting written testimony?	
		Yes	No	For	Against	Neutral	Yes	No
Lizzie Fussell <i>Oregon Latino Health Coalition</i>	503-505-4671		X	X			X	
Gil Munoz				X				
John Humme <i>Or. Comm on Hispanic Affairs</i>	<i>Oregon Primary Care Association</i>			X			X	
Commissioner Parker				X			X <i>(already submitted)</i>	
<del>Dr. Carlos Caspe</del>				X				
Mike Wenrick <i>Medical Teams International</i>		X		X				X