

# HOUSE FEDERAL AND STATE AFFAIRS COMMITTEE

BILL NUMBER: \_\_\_\_\_

Support \_\_\_\_\_

Oppose \_\_\_\_\_

Neutral \_\_\_\_\_

Testimony Will Be: In Person Oral \_\_\_\_\_ Webex Oral \_\_\_\_\_ Written Only \_\_\_\_\_

For Meeting on \_\_\_\_\_  
(Date)

Testimony By: \_\_\_\_\_  
(Name of person testifying)

On Behalf Of: \_\_\_\_\_  
(Association, Corporation, Individual)

Email Address: \_\_\_\_\_

Telephone: \_\_\_\_\_