

WITNESS INFORMATION FORM

Please complete the Witness Information Form before testifying:

Date: June 2, 2020

Name: Emily M. Hodges

Are you representing: Yourself Organization

Organization (If Applicable): _____

Position/Title: _____

Address: 415 Bond Place, Apt 9A

City: Cincinnati State: OH Zip: 45206-1878

Best Contact Telephone: 859-466-1314 Email: emilyhodgesoh@gmail.com

Do you wish to be added to the committee notice email distribution list? Yes No

Business before the committee

Legislation (Bill/Resolution Number): HB680

Specific Issue: Absentee Voting and Mail in Ballots

Are you testifying as a: Proponent Opponent Interested Party

Will you have a written statement, visual aids, or other material to distribute? Yes No

(If yes, please send an electronic version of the documents, if possible, to the Chair's office prior to committee. You may also submit hard copies to the Chair's staff prior to committee.)

How much time will your testimony require? I'm unable to appear in person, writing instead

Please provide a brief statement on your position:

I strongly oppose HB 680 and it's provisions designed to create many obstacles to absentee and mail in voting. I am a 75 year old retired small business owner with COPD and want to be sure I can vote absentee in November, 2020 in case there is a resurgence of COVID-19 that would make it dangerous for me to vote in person. Mail in voting has worked well for many years in Washington state and other states.

Please be advised that this form and any materials (written or otherwise) submitted or presented to this committee are records that may be requested by the public and may be published online.