

WITNESS INFORMATION FORM

Please complete the Witness Information Form before testifying:

Date: 4/3/2019

Name: Pat McDonald

Are you representing: Yourself _____ Organization

Organization (If Applicable): Ohio Lottery Commission

Position/Title: Director

Address: 615 W. Superior Ave

City: Cleveland State: Ohio Zip: 44113

Best Contact Telephone: 216-970-7029 Email: Pat.McDonald@lottery.ohio.gov

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

Business before the committee

Legislation (Bill/Resolution Number): HB 106 Main Operating Budget

Specific Issue: Ohio Lottery Commission's Budget

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? Approximately 10 mins

Please provide a brief statement on your position:

This testimony is to explain the Lottery's budget request which provides the resources necessary for the Lottery to provide \$1.126 billion in FY'20 and \$1.177 billion in FY'21 to the Lottery Profits Education Fund (LPEF).

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.