

WITNESS INFORMATION FORM

Please complete the Witness Information Form before testifying:

Date: April 8, 2019

Name: Dan Grothouse

Are you representing: Yourself _____ Organization

Organization (If Applicable): St. Marys City Schools

Position/Title: Transportation Supervisor

Address: 2250 State Route 66 North

City: St. Marys _____ State: OH _____ Zip: 45885

Best Contact Telephone: 419-305-3505 _____ Email: dan.grothouse@smriders.net

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

Business before the committee

Legislation (Bill/Resolution Number): Ohio Fair School Funding Plan

Specific Issue: Transportation and School Safety

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? 15-20 minutes

Please provide a brief statement on your position:

I am supportive of the transportation and school safety funding components recommend in the Ohio Fair School Funding Plan.

I am also in support of the overall Ohio Fair School Funding Plan

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.