

WITNESS INFORMATION FORM
HOUSE PUBLIC UTILITIES COMMITTEE
REPRESENTATIVE JAMIE CALLENDER, CHAIRMAN

PLEASE COMPLETE THE WITNESS INFORMATION FORM BEFORE TESTIFYING

DATE: 01/28/2020

NAME: MARSHA WHITTON NAGY

ORGANIZATION: NA

(IF APPLICABLE)

POSITION/TITLE: RETIRED TEACH;

FULLTIME FARMER

ADDRESS: 33966 TR 447

CITY: RUTLAND

STATE: OH

ZIP: 45775

TELEPHONE: _____

ARE YOU REPRESENTING: YOURSELF _____

ORGANIZATION _____

DO YOU WISH TO TESTIFY ON

LEGISLATION (BILL NUMBER): SB 33

SPECIFIC ISSUE: _____

SUBJECT MATTER: _____

PLEASE INDICATE YOUR POSITION ON THE BILL

PROONENT: _____

OPONENT: X

INTERESTED PARTY: _____

PLEASE GIVE A BRIEF STATEMENT OF THE GROUNDS ON WHICH YOU FAVOR OR OPPOSE SUCH ENACTMENT:

IT IS A BILL THAT IS REDUNDANT, INFRINGES ON FIRST AMENDMENT RIGHTS, GIVES UNDO PROTECTION TO AN INDUSTRY THAT IS KILLING IS ENDANGERING WATER, SOIL, AIR, AND HUMAN BODIES. THE BILL IS OVERREACH AND INTIMIDATES LAW ABIDING CITIZENS FROM PARTICIPATING IN THE DEMOCRATIC PROCESS.

WILL YOU HAVE A WRITTEN STATEMENT, VISUAL AIDS, OR OTHER MATERIAL TO DISTRIBUTE?

YES _____ NO _____

(IF YES, PLEASE PROVIDE COPIES TO THE CHAIRMAN OR SECRETARY)

HOW MUCH TIME WILL YOUR TESTIMONY REQUIRE? _____