## Witness Information Form

## Please Complete the Witness Information Form Before Testifying

Date: Wednesday, April 14, 2021

Name: T. Nicole Taylor

Organization (If Applicable): Cincinnati NAACP

Position/title: 1st Vice President

Address: 5401 Bluebird Lane

City: Cincinnati State: OH Zip: 45239

Telephone: 513-371-4136

Email: tnicoletaylor23@gmail.com

Are You Representing: Yourself Organization X

Do You Wish to Testify On:

• Legislation (bill number): H. B. No. 99

- Specific issue:
- Subject matter:

Are You Testifying as a:

- Proponent:
- Opponent: X
- Interested Party:

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

(If yes, please provide copies to the Chairman or Committee Clerk)

How much time will your testimony require?

• Committee Chair may limit testimony in the interest of time