WITNESS INFORMATION FORM

Please complete the Witness Information Form before testifying:

Date: April 17, 2023
Name: Gregory James Witt
Are you representing: Yourself \(\sum \) Organization \(\sum \)
Organization (If Applicable):
Position/Title:
Address: 6810 Rhineview Court
City: Dayton State: OH Zip: 45459
Best Contact Telephone: 847.343.6464 Email: witt.greg@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): HJR1
Specific Issue: Opposition to HJR1
Are you testifying as a: Proponent Opponent Interested Party
Will you have a written statement, visual aids, or other material to distribute? Yes \square No \boxtimes
(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? none - written testimony only
Please provide a brief statement on your position: I am opposed to the resolution and anything that makes it harder for voters to amend the Ohio Constitution.

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.