Witness Information Form

Please Complete the Witness Information Form Before Testifying

Date: Tuesday, April 23, 2024

Name: Rick Smith

Organization (If Applicable): Ohio Association of Career-Technical Superintendents

Position/title: President, Superintendent of OH Hi Point

Address: 180 E. Broad St.

City: Columbus State: OH Zip: 43230

Telephone: 614-806-2152

Email: rsmith@2ohiohipoint.com

Are You Representing: Yourself Organization X

Do You Wish to Testify On:

• Legislation (bill number): H. B. No. 432

• Specific issue:

• Subject matter:

Are You Testifying as a:

• Proponent: X

• Opponent:

• Interested Party:

Do you have a written statement, visual aids, or other material to distribute?

Yes 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