

Witness Information Form

Please Complete the Witness Information Form Before Testifying

Date: Monday, March 20, 2023

Name: Kurt Miller

Organization (If Applicable): Empowering People

Position/title: President/CEO

Address: 1268 North River Rd NE

City: Warren State: OH Zip: 44483

Telephone: 330-974-1266

Email: kmiller@empowering-people.net

Are You Representing: Yourself

Organization X

Do You Wish to Testify On:

- Legislation (bill number):
- Specific issue:
- Subject matter:

Are You Testifying as a:

- Proponent:
- Opponent:
- Interested Party: X

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? 5

- *Committee Chair may limit testimony in the interest of time*