

Witness Information Form

Please Complete the Witness Information Form Before Testifying

Date: Monday, March 20, 2023

Name: Nicholas Ciarniello

Organization (If Applicable): Willoughby Eastlake City Schools

Position/title: Treasurer/CFO

Address: 35353 Curtis Blvd.

City: Eastlake State: OH Zip: 44095

Telephone: 440-975-3760

Email: nick.ciarniellow@weschools.org

Are You Representing: Yourself

Organization X

Do You Wish to Testify On:

- Legislation (bill number): H. B. No. 1
- 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 X No

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

How much time will your testimony require? 3

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