

Witness Information Form

Please Complete the Witness Information Form Before Testifying

Date: Tuesday, March 18, 2025

Name: Ben Goodyear

Organization (If Applicable): Amerileagues

Position/title: Owner

Address: 11227 Grandon Ridge Circle

City: Montgomery State: OH Zip: 45249

Telephone: 513-376-1176

Email: ben.goodyear@amerileagues.com

Are You Representing: Yourself

Organization X

Do You Wish to Testify On:

- Legislation (bill number): H. B. No. 79
- 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 X No

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

How much time will your testimony require? 5 minutes

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