

Witness Information Form

Please Complete the Witness Information Form Before Testifying

Date: Tuesday, March 25, 2025

Name: Chief Teresa Theetge

Organization (If Applicable): City of Cincinnati Police

Position/title: Chief

Address: 310 Ezzard Charles Drive

City: Cincinnati State: OH Zip: 45214

Telephone: 513-352-3536

Email: erica.faaborg@cincinnati-oh.gov

Are You Representing: Yourself

Organization X

Do You Wish to Testify On:

- Legislation (bill number): H. B. No. 126
- Specific issue:
- Subject matter:

Are You Testifying as a:

- Proponent:
- Opponent: X
- Interested Party:

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

Yes No X

(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*