

WITNESS INFORMATION FORM

Please complete the Witness Information Form before testifying:

Date: March 7, 2025

Name: Dan Overfield

Are you representing: Yourself ☒ Organization ☐

Organization (If Applicable): _____

Position/Title: American Citizen

Address: 29602 W. Oakland

City: Bay Village State: Ohio Zip: 44140

Best Contact Telephone: 215 900-4082 Email: drover50@gmail.com

Do you wish to be added to the committee notice email distribution list? Yes ☒ No ☐

Business before the committee

Legislation (Bill/Resolution Number): Senate Bill 1

Specific Issue: Higher Education

Are you testifying as a: Opponent ☒

Will you have a written statement, visual aids, or other material to distribute? Yes ☒ No ☐

(If yes, please send an electronic version of the documents, if possible, to the Chair's office prior to committee. You may also submit hard copies to the Chair's staff prior to committee.)

How much time will your testimony require? Written Testimony

Please provide a brief statement on your position: This bill is an extraordinary BIG government overreach that will do the opposite of its alleged goal.

Please be advised that this form and any materials (written or otherwise) submitted or presented to this committee are records that may be requested by the public and may be published online.