WITNESS INFORMATION FORM

Please complete the Witness Information Form before testifying:

Date: June 9, 2026

Name: Rebecca Phillips

Are you representing: Yourself ☑ Organization ☐

Organization (If Applicable): _____

Position/Title: _____

Address: 2200 Scottwood Avenue, Unit 115

City: Toledo State: OH Zip: 43620

Best Contact Telephone: 567-389-2296 Email: bennphil@hotmail.com

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

Business before the committee

Legislation (Bill/Resolution Number): HB 472

Specific Issue: Proposed ID requirements for mail-in ballots

Are you testifying as a: Proponent ☐ Opponent ☑ Interested Party ☐

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? N/A

Please provide a brief statement on your position:

I am opposed to the revised version of HB 472 because it disenfranchises voters and decreases election security.

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.