WITNESS INFORMATION FORM

Please complete the Witness Information Form before testifying:

Date:	March 8, 2021		
Name:	Wayne Lauer		
Are you representing: Yourself 🗹 Organization 🗌			
Organiz	zation (If Applicable):		
Position Address	OFF Olenten av	Crossings W	/est
City: _	Delaware St	ate: OH	Zip: <u>43015</u>
	ontact Telephone: 614		
Do you wish to be added to the committee notice email distribution list? Yes 🗌 No 🖌			
Business before the committee Legislation (Bill/Resolution Number): SB 22 Specific Issue:			
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? Written only			
Chairman Wiggam, V I am testifying today i This bill restores the I	provide a brief statement Vice Chaiman John, Ranking Member Kelly, and members of the S in favor of SB 22 as an Ohio resident deeply concerned about cour balance of power to where it should be, between the three, COEQ and the future of our children is on the line. Our state cannot three	State and Local Government Reform Comm ses of action being taken under the current JAL branches of government, and finally gi	litee, emergency powers and the dire effects it is having on all of us. ves a VOICE to the PEOPLE of Ohio via their legislators during a declared emergency. Our businesses, our economy, our social and

Please stand up and protect our personal liberties and the future of our state by voting YES on SB 22. Thank you, Wayne Lauer

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.