

# WITNESS INFORMATION FORM

Please complete the Witness Information Form before testifying:

Date: May 9, 2022

Name: Rickey Cox

Are you representing: Yourself  Organization

Organization (If Applicable): Lawrence County District Advisory Council

Position/Title: Secretary, District Advisory Council, President of Board, Elizabeth Township Trustees

Address: 563 Township Road 269

City: Pedro

State: OH

Zip: 45659

Best Contact Telephone: 740-646-1347

Email: rcox5151@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): House Bill 463

Specific Issue: Elimination of the District Advisory Council

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 statement only

Please provide a brief statement on your position:

Having the District Advisory Council is crucial to our community. Each of us can monitor our Townships, see the needs of the people and report back to the DAC or inform our residents of programs or assistance available to them that they may not otherwise know exists. We know our residents and can see the need. Many are elderly and do not have access to internet or understanding of how to use it. We are their voice and report to the Board of Health when we see a need. It would not be possible for a Three-Person board to see all areas of the county. Our county residents would suffer the consequences of eliminating the DAC.

*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.*