

WITNESS INFORMATION FORM

Please complete the Witness Information Form before testifying:

Date: April 18, 2023

Name: Anne Malone

Are you representing: Yourself Organization

Organization (If Applicable): _____

Position/Title: _____

Address: 330 Wiltshire Blvd.

City: Oakwood State: Ohio Zip: 45419

Best Contact Telephone: 937-294-2242 Email: anne_malone@juno.com

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

Business before the committee

Legislation (Bill/Resolution Number): HJR1

Specific Issue: Constitutional Amendment Changes

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; written testimony only

Please provide a brief statement on your position: I am opposed to this resolution and anything that makes it harder for voters to amend the Ohio Constitution.

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.

Written testimony opposing HJR1:

I oppose HJR1 because it presents unnecessary roadblocks to Ohioans who want a voice in their government. It makes collecting signatures more difficult and removes the cure period, both of which serve to blunt citizen initiatives. Most heinous of all is the requirement that amendments require 60% of voters to agree with the amendment for passage. This permits 40% of voters to nullify the will of the rest of the voters. This is undemocratic.