

# WITNESS INFORMATION FORM

Please complete the Witness Information Form before testifying:

Date: 04/15/2023

Name: Scott Gerald Pompeo

Are you representing: Yourself  Organization

Organization (If Applicable): \_\_\_\_\_

Position/Title: Technical Consultant for Alkami Technology

Address: 626 Lehman St. Unit 221

City: Columbus State: Ohio Zip: 43206

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

Business before the committee

Legislation (Bill/Resolution Number): HJR1 and SJR2

Specific Issue: Require 60% vote to approve any constitutional amendment

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, 2 minutes

Please provide a brief statement on your position: Ohio has been a strong beacon of direct democratic action by its citizens, and this bill threatens to significantly curtail that power. The voter driven ballot was introduced as a check and balance against the State legislature, and this bill would ensure that no other ballot measure would ever have a chance of acting as a check again. I ask the Ohio State Legislature to continue to allow the voters the chance to have their voices heard directly.

*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.*