



HEALTH, HUMAN SERVICES AND MEDICAID COMMITTEE

WITNESS FORM

Today's Date: November 12, 2019

Name: Barb Ranck

Address:

Telephone:

Organization Representing: Ohio Dental Hygienists Association

Testifying on bill number: Sub. H. B. No. 11

Testimony: ☐ Verbal ☐ Written ☒ Both

Testifying as: ☐ Sponsor ☒ Proponent ☐ Opponent ☐ Interested Party

Are you a registered lobbyist? ☐ YES ☒ NO

Special Requests:

Written testimony is a public record and may be posted on the Ohio Senate's website