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ORGANIZATION REPRESENTED (if any) Lea g Le	smen Voter M
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ADDRESS (OPTIONAL) 40 Wyr word I/Ld	(Rethan N 5 0 1928
TELEPHONE (OPTIONAL)	
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Speaker will be accorded an opportunity to testify at the Chair's discretion. Please give this completed form to the Committee aide prior to the start of the meeting along v	NO NEED TO TESTIFY vith copies of any prepared statement.
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il lacat X (maio	DATE: 12 13 18
NAME MOUNT ALOSTO	- (
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E-MAIL (OPTIONAL) MM 10elsson	
ADDRESS (OPTIONAL) (6 SCAVBOVOUCH Rd	ML, N507046
TELEPHONE (OPTIONAL)	38792403
WISH TO SPEAK ON BILL NUMBER ACR 205	
PLEASE SUBMIT ONLY ONE BILL NUM	MBER PER SLIP
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Speaker will be accorded an opportunity to testify at the Chair's discretion.	NO NEED TO TESTIFY $\ \Box$
Please give this completed form to the Committee aide prior to the start of the meeting along w	ith copies of any prepared statement.

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ADDRESS (OPTIONAL) \sim DISON \sim 0794	<u> </u>
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Please give this completed form to the Committee aide prior to the start of the meeting	g along with copies of any prepared statement.
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AME_SusanM. Blubaush	DATE: 12/13/18
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AME SUSON M. BUBAUSA RGANIZATION REPRESENTED (if any) -MAIL (OPTIONAL)	DATE: 12/13/18
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NAME Marco Palladino	DATE: [A/17/8
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E-MAIL (OPTIONAL)	
ADDRESS (OPTIONAL)	
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Speaker will be accorded an opportunity to testify at the Chair's discretion.	NO NEED TO TESTIFY
Please give this completed form to the Committee aide prior to the start of the meeting along with	th copies of any prepared statement.
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AME Cindry Matute-Brown	DATE: 12-13-18
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ASSEMBLY JUDICIARY COMMITTEE	That I was
NAME PATRICK MURRAY	DATE: 12/13/18
ORGANIZATION REPRESENTED (if any) Monmouth University Polling	Institute
3-MAIL (OPTIONAL)	,
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AME RONALD K. CHEN	DATE: 12/13/18
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Please give this completed form to the Committee aide prior to the start of the meeting along with copies of any prepared statement.

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Speaker will be accorded an opportunity to testify at the Chair's discretion.

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NAME BARRY	BRENDEL	DATE:
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Larry D. Imboff	DATE: 12/13/18
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)RGANIZATION REPRESENTED (if any)	nbertville
DDRESS (OPTIONAL) 32 Lincoln Ave	1 1 -11
	Lambertville NJ Cfs30
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	DATE: 12/13/16
NAME Laura Zurlich	
ORGANIZATION REPRESENTED (if any)	5 r Represent US
E-MAIL (OPTIONAL) ZUILINS 98 @ 9	main (, CCM -
ADDRESS (OPTIONAL) LA BUN (CON 19	III Cranbone NJ
TELEPHONE (OPTIONAL) $(60)91$	6761
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Speaker will be accorded an opportunity to testify at the Chair's	
Please give this completed form to the Committee aide prior to	the start of the meeting along with copies of any prepared statement.
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ASSEMBLY I	UDICIARY COMMITTEE
ADDENTIFIE	objective community
	DATE: 1 > /13/2019
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DDRESS (OPTIONAL) Westa eld No	<u> </u>
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Speaker will be accorded an opportunity to testify at the Chair's	discretion. NO NEED TO TESTIFY
Please give this completed form to the Committee aide prior to the	•

	DATE: 1211312018
JAME David Goodmon	
	CONTRAIN)
organization represented (if any) Represent Usemail (optional) davidgood mon 382 @)	181720N. NEY
ADDRESS (OPTIONAL)	
ELEPHONE (OPTIONAL)	<u> </u>
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Speaker will be accorded an opportunity to testify at the Chair's discretion.	NO NEED TO TESTIFY \Box
Please give this completed form to the Committee aide prior to the start of the	meeting along with copies of any prepared statement.
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AME AME CING (GANIZATION REPRESENTED (if any) (COAN (N/O)) -MAIL (OPTIONAL) DDRESS (OPTIONAL) ELEPHONE (OPTIONAL) WISH TO SPEAK ON BILL NUMBER ACR 205 PLEASE SUBMIT ONLY	DATE: 12-13-18 ONE BILL NUMBER PER SLIP

NAME MORGREST Illis	DATE: 12 13/18
ORGANIZATION REPRESENTED (if any) N 7 FOC W (ACC)	
E-MAIL (OPTIONAL)	
ADDRESS (OPTIONAL)	
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wish to speak on bill number $ACR 205$	
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Speaker will be accorded an opportunity to testify at the Chair's discretion.	NO NEED TO TESTIFY
Please give this completed form to the Committee aide prior to the start of the meeting along with copies of	f any prepared statement.
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ASSEMBLY JUDICIARY COMMITTEE	Called 1.06
IAME Bran Cel	DATE: 12/13/2018
ORGANIZATION REPRESENTED (if any) Indivisible (+ 1)	NJ
-MAIL (OPTIONAL) Unboxed & gmail, com	1
DDRESS (OPTIONAL) (28 Kingsberry Pr Somer Se	4 N3
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Speaker will be accorded an opportunity to testify at the Chair's discretion.	NO NEED TO TESTIFY
Please give this completed form to the Committee gide prior to the start of the meeting along with copies of	Fany, propored statement

ASSEMBLY JUDICIARY COMMITTEE	Culled at 12:15
	DATE: 13 Dec. 18
IAME Sally J. Geller	EALLO HONTH
RGANIZATION REPRESENTED (if any) UV Firth Action NJ	
-MAIL (OPTIONAL) SJGUUR acl com	
DDRESS (OPTIONAL) Wood Lift Lake	
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Speaker will be accorded an opportunity to testify at the Chair's discretion.	NO NEED TO TESTIFY \Box
Please give this completed form to the Committee aide prior to the start of the meeting along with copies o	f any prepared statement.
THIS FORM IS A GOVERNMENT RECORD AND WILL BE AVAILABLE TO THE I	PUBLIC UPON REQUEST.
ASSEMBLY JUDICIARY COMMITTEE	Nancy Hedinger
NAME_ SANdrA MATSEN	DATE: 12/13/18
ORGANIZATION REPRESENTED (if any) League of Women Votes	rs of NJ
E-MAIL (OPTIONAL) ADDRESS (OPTIONAL) 204 W 5 take 5 treet Tree	en ton
TELEPHONE (OPTIONAL)	
	<u> </u>
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Speaker will be accorded an opportunity to testify at the Chair's discretion.	NO NEED TO TESTIFY \Box

THIS FORM IS A GOVERNMENT RECORD AND WILL BE AVAILABLE TO THE PUBLIC UPON REQUEST.

Called 1:47 pm Not Here Called 2:10-14H

AME Amy Goldsmith	DATE: 12-13-18
RGANIZATION REPRESENTED (if any)	
-MAIL (OPTIONAL)	
DDRESS (OPTIONAL)	
ELEPHONE (OPTIONAL)	
WISH TO SPEAK ON BILL NUMBER A CR 205	
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Speaker will be accorded an opportunity to testify at the Chair's discretion.	NO NEED TO TESTIFY
Please give this completed form to the Committee aide prior to the start of the meeting along with co	pies of any prepared statement.
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ASSEMBLY JUDICIARY COMMITTE	EE Called 1:47 Not Here
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ASSEMBLY JUDICIARY COMMITTED NAME HERBERT L. TARBOUS	EE Culled 1:47 Not Here DATE: 12/13/10
NAME HERBERT L. TARBOUS	DATE: 12/13/18 Catted > 14
NAME HERBERT L. TARBOUS	Not Here
NAME HERBERT L. TARBOUS ORGANIZATION REPRESENTED (if any) CENTRAC TERSEY PRO	DATE: 12/13/10 CALLESSIVE DEMOCRAIS
NAME HERBERT L. TARBOUS DRIGANIZATION REPRESENTED (if any) CENTRAC TERSEY PRO 3-MAIL (OPTIONAL) TARBOUS GNALL. COM ADDRESS (OPTIONAL) 4/1 NEW MARKETRO., PISCATAWA TELEPHONE (OPTIONAL) 2/2-662-0117	DATE: 12/13/10 CALLESSIVE DEMOCRAIS
NAME HERBERT L. TARBOUS DRGANIZATION REPRESENTED (if any) ENTRAC TELSEY PRO B-MAIL (OPTIONAL) TARBOUS GNACE. COM ADDRESS (OPTIONAL) 4/1 NEW MARKET RD., PISCITAWA TELEPHONE (OPTIONAL) 2/2-662-0117 WISH TO SPEAK ON BILL NUMBER ACR205	DATE: 12/13/10 CARLESTINE DEMOCRAIS A4, NJ 0885
NAME HERBERT L. TARBOUS DRIGANIZATION REPRESENTED (if any) CENTRAC TERSEY PRO 3-MAIL (OPTIONAL) TARBOUS GNALL. COM ADDRESS (OPTIONAL) 4/1 NEW MARKETRO., PISCATAWA TELEPHONE (OPTIONAL) 2/2-662-0117	DATE: 12/13/10 CARLESTINE DEMOCRAIS A4, NJ 0885
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Called 1:06 NH Called 2:12 DATE: 12/13/18

IAME LISH BENDETT	DATE: 1 4/13/10
RGANIZATION REPRESENTED (if any) LWV League o	f Women Voters
-MAIL (OPTIONAL)	
DDRESS (OPTIONAL)	
ELEPHONE (OPTIONAL)	
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Speaker will be accorded an opportunity to testify at the Chair's discretion. Please give this completed form to the Committee aide prior to the start of the meeting a	NO NEED TO TESTIFY
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ASSEMBLY JUDICIARY	COMMITTEE
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ATE: 12/13/218

March. De 1/2	DATE: 12/13/2018
NAME (MIPOLINA X UBSO NIELLO	Called NH 2:121
ORGANIZATION REPRESENTED (if any) Includes the Calden Jake W	WOS
-MAIL (OPTIONAL) CMUSSONIEILO Quimail, WM	
DDRESS (OPTIONAL) 400 Comp (16 by Aboury 18 800)	
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ASSEMBLY JUDICIARY COMMIT	Cm 15,10 D/kg
Both SI	DATE: # 12 13 18 CALLED 2:12 N.H.
NAME Beth Stevens	DATE: # 12 13/18 Culled 2:12 NH
NAME Beth Stevens ORGANIZATION REPRESENTED (if any) Greater New pronswick	DATE: # 12 13/18 Culled 2:12 NH
NAME Deth Stevens ORGANIZATION REPRESENTED (if any) Greater New pronswick E-MAIL (OPTIONAL)	DATE: # 12 13/18 Culled 2:12 NH
NAME Deth Stevens ORGANIZATION REPRESENTED (if any) Greater New pronswick E-MAIL (OPTIONAL) ADDRESS (OPTIONAL)	DATE: # 12 13/18 Culled 2:12 NH
NAME Deth Stevens ORGANIZATION REPRESENTED (if any) Greater New pronswick E-MAIL (OPTIONAL) ADDRESS (OPTIONAL) TELEPHONE (OPTIONAL)	DATE: # 12/13/18 Called 2:12 NH League of Womens Noton
NAME Deth Stevens ORGANIZATION REPRESENTED (if any) Greater New pronswick E-MAIL (OPTIONAL) ADDRESS (OPTIONAL)	DATE: # 12 13 18 Culled 2:12 NH League of Womenson Votan
NAME Deth Stevens ORGANIZATION REPRESENTED (if any) Greater New pronswick E-MAIL (OPTIONAL) ADDRESS (OPTIONAL) TELEPHONE (OPTIONAL) WISH TO SPEAK ON BILL NUMBER	DATE: # 12 13 18 Culled 2:12 NH League of Womenson Votan
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DATE: D', 12NH

NAME hatie Werthamer	
ORGANIZATION REPRESENTED (if any) Planned Parenthood	Action Frond C NIT
E-MAIL (OPTIONAL)	ACTOS ICHTER OF INS
ADDRESS (OPTIONAL)	•
TELEPHONE (OPTIONAL)	
WISH TO SPEAK ON BILL NUMBER ACRAOS	
PLEASE SUBMIT ONLY ONE BILL	NUMBER PER SLIP
IN FAVOR	OPPOSED [
Speaker will be accorded an opportunity to testify at the Chair's discretion.	NO NEED TO TESTIFY
Please give this completed form to the Committee aide prior to the start of the meeting along with	n copies of any prepared statement.
THIS FORM IS A GOVERNMENT RECORD AND WILL BE AVAILABLE TO) THE PURITC UPON DEOUBST
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ASSEMBLY JUDICIARY COMMIT	TEE DATE: /2//3//8
ASSEMBLY JUDICIARY COMMITTED	12/12/16
	12/12/16
JAME_ SENATOR TOM KERN	12/12/16
NAME_ SENATOR TOM KERN ORGANIZATION REPRESENTED (if any)	12/12/16
JAME SENATOR TOM KERN PRGANIZATION REPRESENTED (if any) -MAIL (OPTIONAL) SEN KERN @ Wyleg. org DDRESS (OPTIONAL) ELEPHONE (OPTIONAL)	12/12/16
NAME SENATOR TOM KERN ORGANIZATION REPRESENTED (if any) -MAIL (OPTIONAL) SENKERN @ Wyleg. 009 LDDRESS (OPTIONAL)	12/12/16
JAMESENATOR TOM KERN)RGANIZATION REPRESENTED (if any) -MAIL (OPTIONAL) SEN KERN @ Wyleg. org DDRESS (OPTIONAL) ELEPHONE (OPTIONAL)	DATE: 12/13/18 /ACR 205
JAME SENATOR TOM KERN PRGANIZATION REPRESENTED (if any) -MAIL (OPTIONAL) SENKEGN @ W/leg. 009 DDRESS (OPTIONAL) ELEPHONE (OPTIONAL) WISH TO SPEAK ON BILL NUMBER SCR 43 / SCR 152	DATE: 12/13/18 /ACR 205
JAME SENATOR TOM KERN PRICADIZATION REPRESENTED (if any) MAIL (OPTIONAL) SENKEGN & W/eg. 009 DDRESS (OPTIONAL) ELEPHONE (OPTIONAL) WISH TO SPEAK ON BILL NUMBER SCR 43 / SCR 152 PLEASE SUBMIT ONLY ONE BILL N	DATE: /2//3//8 DATE: /2//3//8 JACR 2.05 UMBER PER SLIP OPPOSED NO NEED TO TESTIFY

NAME_ E) aclée Pay	DATE: 12-13-18
ORGANIZATION REPRESENTED (if any)	
E-MAIL (OPTIONAL) Lackée bay 4 @ G MO, D. (1)	
ADDRESS (OPTIONAL)	·
TELEPHONE (OPTIONAL)	
WISH-TO-SPEAR-ON BILL NUMBER GENY WONDER ACK S PLEASE SUBMIT ONLY ONE BILL NUMBER	205 PER SI ID
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Speaker will be accorded an opportunity to testify at the Chair's discretion.	NO NEED TO TESTIFY
Please give this completed form to the Committee aide prior to the start of the meeting along with cor	nies of any prepared statement.
THIS FORM IS A GOVERNMENT RECORD AND WILL BE AVAILABLE TO THE	PUBLIC UPON REQUEST.
ASSEMBLY JUDICIARY COMMITTEE	E
AME_ ELIUd GauTier	DATE: 12/13/18
RGANIZATION REPRESENTED (if any)	
MAIL (OPTIONAL)	
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Speaker will be accorded an opportunity to testify at the Chair's discretion.	NO NEED TO TESTIFY
Please give this completed form to the Committee aide prior to the start of the meeting along with copie	
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	DATE: 6018-12-13
AME TIMOTHY LONGIN	
RGANIZATION REPRESENTED (if any)	
MAIL(OPTIONAL)	
DDRESS (OPTIONAL)	
ELEPHONE (OPTIONAL)	<u> </u>
WISH TO SPEAK ON BILL NUMBER ACK 205	
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Speaker will be accorded an opportunity to testify at the Chair's discretion.	NO NEED TO TESTIFY X
Please give this completed form to the Committee aide prior to the start of the med	eting along with copies of any prepared statement.
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ASSEMBLY JUDICIARY	COMMITTEE
	DATE: 12 · / 3 · /8
AME /ONX Ciordano	
RGANIZATION REPRESENTED (if any)	
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	DATE: 12/13/2018
NAME Marcia Marley	
ORGANIZATION REPRESENTED (if any) 3/02 Ways	
3-MAIL (OPTIONAL) Marciama, bluewam, o	va
ADDRESS (OPTIONAL)	
TELEPHONE (OPTIONAL)	
WISH TO SPEAK ON BILL NUMBER	
PLEASE SUBMIT ONLY ONE BIT	LL NUMBER PER SLIP
IN FAVOR	OPPOSED X
Speaker will be accorded an opportunity to testify at the Chair's discretion.	NO NEED TO TESTIFY
Please give this completed form to the Committee aide prior to the start of the meeting along v	with copies of any prepared statement.
THIS FORM IS A GOVERNMENT RECORD AND WILL BE AVAILABLE	TO THE PUBLIC UPON REQUEST.
Managaran	
ASSEMBLY JUDICIARY COMMI	TTEE
	•
	DATE: 12-13-19
IAME Shoshana Osotshy	
	an fromise
-MAIL (OPTIONAL) allied4 theamerican parnis @ gor	rail com
DDRESS (OPTIONAL) 1109 Buck shotem Ra	
ELEPHONE (OPTIONAL) 609 - 334 - 7082	
WISH TO SPEAK ON BILL NUMBER SCR 152 / ACR 205 PLEASE SUBMIT ONLY ONE BILL NUM	RER PER SI ID
IN FAVOR	
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Speaker will be accorded an opportunity to testify at the Chair's discretion.	NO NEED TO TESTIFY
Please give this completed form to the Committee aide prior to the start of the meeting along with	
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	DATE: 12/13/19
IAME Level Doda	
ORGANIZATION REPRESENTED (if any)	es seduomen Pochosins
-MAIL (OPTIONAL) A Sala 19 Dag 1. Con	Ch asac
DDRESS (OPTIONAL) 320 Wildeline Do	Williamstone 38094
ELEPHONE (OPTIONAL) X5Co- 559 - 0.588	
WISH TO SPEAK ON BILL NUMBER SCR 152	Aer 205
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Speaker will be accorded an opportunity to testify at the Chair's discretion.	NO NEED TO TESTIFY
Please give this completed form to the Committee aide prior to the start of the me	eeting along with copies of any prepared statement.
THIS FORM IS A GOVERNMENT RECORD AND WILL BE AV	AILABLE TO THE PUBLIC UPON REQUEST.
	•
ASSEMBLY JUDICIARY	COMMITTEE
	DATE: 2618-12-13
AME Leslie Kosar Schraer	
RGANIZATION REPRESENTED (if any)	
-MAIL (OPTIONAL)	
DDRESS (OPTIONAL)	
ELEPHONE (OPTIONAL). WISH TO SPEAK ON BILL NUMBER HORS	
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Speaker will be accorded an opportunity to testify at the Chair's discretion.	NO NEED TO TESTIFY
Please give this completed form to the Committee aide prior to the start of the me	eeting along with copies of any prepared statement.
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Writer testimony

A 1	DATE: 2018-12-13
JAME Alexis Larlin	
ORGANIZATION REPRESENTED (if any)	
-MAIL (OPTIONAL)	
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ELEDITONE (ODUTONAL)	
WISH TO SPEAK ON BILL NUMBER	
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Speaker will be accorded an opportunity to testify at the Chair's discreti	on. NO NEED TO TESTIFY
Please give this completed form to the Committee aide prior to the start	of the meeting along with copies of any prepared statement.
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	DESTRUCTION REQUEST.
	Win Hen testimony
ASSEMBLY JUDIO	CIARY COMMITTEE
	Anna DA
	DATE: 12/13/18
AME Jennis Grormley	
ATALT	
MAIL (OPTIONAL) tectog by hot@ gman	1. 6017
DDRESS (OPTIONAL)	
ELEPHONE (OPTIONAL)	
WISH TO SPEAK ON BILL NUMBER // CR	205
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IN FAVOR	OPPOSED
Speaker will be accorded an opportunity to testify at the Chair's discretic	on. NO NEED TO TESTIFY \[\subseteq \]
Please give this completed form to the Committee aide prior to the start	of the meeting along with copies of any prepared statement.

	DATE: 2018-12-13
NAME Joseph Mangano	
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E-MAIL (OPTIONAL)	
ADDRESS (OPTIONAL)	
TELEPHONE (OPTIONAL)	
WISH TO SPEAK ON BILL NUMBER	
	SUBMIT ONLY ONE BILL NUMBER PER SLIP
IN FAVOR	OPPOSED X
Speaker will be accorded an opportunity to testify at the Chair's discr	etion. NO NEED TO TESTIFY
Please give this completed form to the Committee aide prior to the st	art of the meeting along with copies of any prepared statement.
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ASSEMBLY JUI	DICIARY COMMITTEE
ASSEMBLY JUI	DICIARY COMMITTEE
	DICIARY COMMITTEE DATE: 1018-12-13
ASSEMBLY JUI NAME Kathleon Jerome	
JAME Kathleen Jerome	DATE: <u>1018-12-13</u>
NAME KATHEON JEROME DRGANIZATION REPRESENTED (if any)	
NAME KATHEON JETOME ORGANIZATION REPRESENTED (if any) -MAIL (OPTIONAL)	DATE: <u>1018-12-13</u>
DAME KATHEON JETOME ORGANIZATION REPRESENTED (if any) -MAIL (OPTIONAL) DDRESS (OPTIONAL) ELEPHONE (OPTIONAL)	DATE: <u>8018-12-13</u>
NAME KATHEON JETOME ORGANIZATION REPRESENTED (if any) -MAIL (OPTIONAL) DDRESS (OPTIONAL) ELEPHONE (OPTIONAL)	DATE: <u>1018-12-13</u>
NAME KATHEON JETOME ORGANIZATION REPRESENTED (if any) -MAIL (OPTIONAL) DDRESS (OPTIONAL) ELEPHONE (OPTIONAL) WISH TO SPEAK ON BILL NUMBER MK105	DATE: <u>\$\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ </u>
NAME KATHEON JETOME ORGANIZATION REPRESENTED (if any) -MAIL (OPTIONAL) DDRESS (OPTIONAL) ELEPHONE (OPTIONAL) WISH TO SPEAK ON BILL NUMBER MK105	DATE: <u>ROIS-12-13</u> SUBMIT ONLY ONE BILL NUMBER PER SLIP
NAME KATHEON JETOME ORGANIZATION REPRESENTED (if any) -MAIL (OPTIONAL) DDRESS (OPTIONAL) ELEPHONE (OPTIONAL) WISH TO SPEAK ON BILL NUMBER MCKLOS PLEASE	DATE: <u>\$\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ </u>
NAME KATHEON JETOME ORGANIZATION REPRESENTED (if any) -MAIL (OPTIONAL) DDRESS (OPTIONAL) ELEPHONE (OPTIONAL) WISH TO SPEAK ON BILL NUMBER MCKAOS PLEASE IN FAVOR Speaker will be accorded an opportunity to testify at the Chair's discre	DATE: QOIS-12-13 SUBMIT ONLY ONE BILL NUMBER PER SLIP OPPOSED NO NEED TO TESTIFY
NAME KALLECH JEROME ORGANIZATION REPRESENTED (if any) -MAIL (OPTIONAL) DDRESS (OPTIONAL) ELEPHONE (OPTIONAL) WISH TO SPEAK ON BILL NUMBER MKLOS PLEASE IN FAVOR	DATE: QOIS-12-13 SUBMIT ONLY ONE BILL NUMBER PER SLIP OPPOSED NO NEED TO TESTIFY

Written testimony

	DATE: 1016-12-13
JAME Sharon Podsada	
RGANIZATION REPRESENTED (if any)	
-MAIL (OPTIONAL)	,
ADDRESS (OPTIONAL)	
ELEPHONE (OPTIONAL)	
WISH TO SPEAK ON BILL NUMBER ACKROS	
PLEASE SUBM	IT ONLY ONE BILL NUMBER PER SLIP
IN FAVOR	OPPOSED V
Speaker will be accorded an opportunity to testify at the Chair's discretion.	NO NEED TO TESTIFY
Please give this completed form to the Committee aide prior to the start of the	ne meeting along with copies of any prepared statement.
	With testimony
ASSEMBLY JUDICIA	RY COMMITTEE
	DATE: 12/13/19
IAME TOBSRIA KEAVEY	
ORGANIZATION REPRESENTED (if any) 5001 H J &	CHAWOT
DDRESS (OPTIONAL) HADDONFIELD N	
ELEPHONE (OPTIONAL)	
WISH TO SPEAK ON BILL NUMBER ACR 265 aw PLEASE SUBM	OSR 152 SIR 43 IT ONLY ONE BILL NUMBER PER SLIP
IN FAVOR	OPPOSED Z
Speaker will be accorded an opportunity to testify at the Chair's discretion.	NO NEED TO TESTIFY
Please give this completed form to the Committee aide prior to the start of the	e meeting along with copies of any prepared statement.

	DATE: 12/13/14
JAME Susan Druekenbrod	
RGANIZATION REPRESENTED (if any) South Jersey Wa	omen for Pragressive Chang
-MAIL (OPTIONAL) Judy 3330 qmail. com	such 181 1169185108 hadis
ADDRESS (OPTIONAL) 162 Valley Run Dr. Cherry H	;// UT 08002
ELEPHONE (OPTIONAL) 856 373-8574	
WISH TO SPEAK ON BILL NUMBER SCR43, SCR152, ACR60	D. ACR 205
PLEASE SUBMIT ONLY ONE	<i>_</i>
IN FAVOR	OPPOSED
Speaker will be accorded an opportunity to testify at the Chair's discretion.	NO NEED TO TESTIFY
Please give this completed form to the Committee aide prior to the start of the meeting alon	g with copies of any prepared statement.
THIS FORM IS A GOVERNMENT RECORD AND WILL BE AVAILABLE	E TO THE PUBLIC UPON REQUEST.
	<u> </u>
ASSEMBLY JUDICIARY COMIN	AITTEE
	DATE: 12 13 18
AME SHALINI GAGLIARDI	
RGANIZATION REPRESENTED (if any)	
MAIL (OPTIONAL) SOMA CHICACO S (9) angil (M	
ODRESS (OPTIONAL) 43 Southern Blue Gratin	amy
ELEPHONE (OPTIONAL) 224-595-2277	
WISH TO SPEAK ON BILL NUMBER $A \cdot C \times 205$	
PLEASE SUBMIT ONLY ONE E	BILL NUMBER PER SLIP
. IN FAVOR	OPPOSED \(\sum_{\text{\text{op}}}\)
Speaker will be accorded an opportunity to testify at the Chair's discretion.	NO NEED TO TESTIFY Û
Please give this completed form to the Committee aide prior to the start of the meeting along	with copies of any prepared statement.

	12/13/18
NAME Theresa Winegar	DATE: 12/10/10
ORGANIZATION REPRESENTED (if any) NIGOP	
E-MAIL (OPTIONAL) theresa @njgop.org	
ADDRESS (OPTIONAL)	
TELEPHONE (OPTIONAL) 609-989-7300	
WISH TO SPEAK ON BILL NUMBER A CR205 / SCR43	/SCR152
PLEASE SUBMIT ONLY ONE	BILL NUMBER PER SLIP
IN FAVOR	OPPOSED X
Speaker will be accorded an opportunity to testify at the Chair's discretion.	NO NEED TO TESTIFY
Please give this completed form to the Committee aide prior to the start of the meeting	g along with copies of any prepared statement.
THIS FORM IS A GOVERNMENT RECORD AND WILL BE AVAILA	BLE TO THE PUBLIC UPON REQUEST
	or or other desired.
ASSEMBLY JUDICIARY CO	MMITTEE
	DATE: 12/17/2018
IME JOSE CHUA	
EGANIZATION REPRESENTED (if any) MILLBURN - SHURT MI	LLS ACTION NETHORIT
MAIL (OPTIONAL)) o Se Chad @ Snail. Com	
DRESS (OPTIONAL)	
LEPHONE (OPTIONAL)	
WISH TO SPEAK ON BILL NUMBER ACC 205	
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Speaker will be accorded an opportunity to testify at the Chair's discretion.	NO NEED TO TESTIFY
Please give this completed form to the Committee aide prior to the start of the meeting a	along with copies of any prepared statement.

	17/12/15
AME_Patricia Kaiser	DATE: / 2/13//8
RGANIZATION REPRESENTED (if any) Millburn - Sho -MAIL (OPTIONAL) DIKRISET OH GYMCOL, COM	rt Hills Acron Network
-MAIL (OPTIONAL) DIKRISET Of Grand. com	
DDRESS (OPTIONAL)	
ELEPHONE (OPTIONAL)	
WISH TO SPEAK ON BILL NUMBER \Box	205
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Speaker will be accorded an opportunity to testify at the Chair's discretion.	NO NEED TO TESTIFY
Please give this completed form to the Committee aide prior to the start of the meeting	ng along with copies of any prepared statement.
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	B. Sparse Philips
ASSEMBLY JUDICIARY	COMMITTEE
NAME_Teresastimpfel	DATE: 12/13/2018
VAIVIL JUSTICE TO THE PARTY OF	
ORGANIZATION REPRESENTED (if any)	
E-MAIL (OPTIONAL)	
ADDRESS (OPTIONAL) 328 Andover P/	Rubbinsulle
TELEPHONE (OPTIONAL)	
WISH TO SPEAK ON BILL NUMBER ACR 205 PLEASE SUBMIT ON	LY ONE BILL NUMBER PER SLIP
IN FAVOR	OPPOSED
Speaker will be accorded an opportunity to testify at the Chair's discretion.	NO NEED TO TESTIFY
Please give this completed form to the Committee aide prior to the start of the mee	ting along with conies of any prepared statement

		DATE: 12/13/18
NAME Richard C	Bre Iv	211121 <u>1 - </u>
ORGANIZATION REPRESENTED (if an	iy) LWV	
3-MAIL (OPTIONAL)		
DDRESS (OPTIONAL) ZEL	elill the Morristern N.1079	340
ELEPHONE (OPTIONAL)	4	
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Speaker will be accorded an opportunity to		NO NEED TO TESTIFY
Please give this completed form to the Con	nmittee aide prior to the start of the meeting along with copies of	of any prepared statement.
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		d 11 1 :
	ACCEPTACIONAL	Called 1:2?
	ASSEMBLY JUDICIARY COMMITTEE	Culled 1:2? Not Hen
NAME Ann Vardeman	ASSEMBLY JUDICIARY COMMITTEE	Culled 1:2? Not Hen DATE: 12/13/18
NAME ANN Vardeman DRGANIZATION REPRESENTED (if any)	ASSEMBLY JUDICIARY COMMITTEE New Jersey Citizen Acti	Not How
V2.1(VII.)		Not How
ORGANIZATION REPRESENTED (if any)		Not How
ORGANIZATION REPRESENTED (if any)		Not How
ORGANIZATION REPRESENTED (if any) 3-MAIL (OPTIONAL) ADDRESS (OPTIONAL)	New Jersey Citizen Acti ACR-205	DATE: 12/13/18
DRGANIZATION REPRESENTED (if any) 3-MAIL (OPTIONAL) ADDRESS (OPTIONAL) CELEPHONE (OPTIONAL) WISH TO SPEAK ON BILL NUMBER		DATE: 12/13/18
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	DATE: 12/13/15
JAME arol E. Jay	
)RGANIZATION REPRESENTED (if any)	e Industrial Union Council
-MAIL (OPTIONAL) and gay 747	O ool Com
DDRESS (OPTIONAL)	
ELEPHONE (OPTIONAL)	732 616-1151
WISH TO SPEAK ON BILL NUMBER PLEASE SUBMIT	ONLY ONE BILL NUMBER PER SLIP
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Speaker will be accorded an opportunity to testify at the Chair's discretion	n. NO NEED TO TESTIFY
Please give this completed form to the Committee aide prior to the start of	of the meeting along with copies of any prepared statement.
THIS FORM IS A GOVERNMENT RECORD AND WILL BE	E AVAILABLE TO THE PUBLIC UPON REQUEST.
ASSEMBLY JUDIO	CIARY COMMITTEE
VAME Sally Marura	DATE: 12/13/18
ORGANIZATION REPRESENTED (if any) L WV &	aurerce Zwap.
-MAIL (OPTIONAL) Sally marucal of mo	
ADDRESS (OPTIONAL)	
ELEPHONE (OPTIONAL)	
WISH TO SPEAK ON BILL NUMBER ACC 205	- ACRGO
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Speaker will be accorded an opportunity to testify at the Chair's discretion	n. NO NEED TO TESTIFY
Please give this completed form to the Committee aide prior to the start of	f the meeting along with copies of any prepared statement.

AME ELIZABETH MORGAN	DATE: 12/13/18
RGANIZATION REPRESENTED (if any)	OF WOMEN VOTERS
-MAIL (OPTIONAL) bethm 102001 @ gmzil.com DDRESS (OPTIONAL)	
ELEPHONE (OPTIONAL)	
WISH TO SPEAK ON BILL NUMBER ACR 205 ACR 60 PLEASE SUBMIT ONLY ONE BILL	NUMBER PER SLIP
IN FAVOR	OPPOSED \
Speaker will be accorded an opportunity to testify at the Chair's discretion.	NO NEED TO TESTIFY $\left X \right $
Please give this completed form to the Committee aide prior to the start of the meeting alon	
THIS FORM IS A GOVERNMENT RECORD AND WILL BE AVAILABLE	TO THE PUBLIC UPON REQUEST.
ASSEMBLY JUDICIARY COM	MITTEE
AME_ Nicole Plett	DATE: 12·13·18
RGANIZATION REPRESENTED (if any) LWV of LOWNINCE T	ND
-MAIL (OPTIONAL) NBPLETTE YAHOO COM DDRESS (OPTIONAL) LAWIENCL TWO NJ 08648	
ELEPHONE (OPTIONAL)	
WISH TO SPEAK ON BILL NUMBER ACR 60 + ACR PLEASE SUBMIT ONLY ONE BILL	NUMBER PER SLIP
IN FAVOR	OPPOSED X
Speaker will be accorded an opportunity to testify at the Chair's discretion.	NO NEED TO TESTIFY
Please give this completed form to the Committee aide prior to the start of the meeting alor	ng with copies of any prepared statement.

ιΛ	DATE: 12/13/2018
NAME HUN Keac	
ORGANIZATION REPRESENTED (if any)	
E-MAIL (OPTIONAL) avea 1970 a	Zmail. Can
ADDRESS (OPTIONAL) ADDRESS (OPTIONAL) ADDRESS (OPTIONAL)	Cliffen
TELEPHONE (OPTIONAL)	
WISH TO SPEAK ON BILL NUMBER	
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Speaker will be accorded an opportunity to testify at the Chair's discretion.	NO NEED TO TESTIFY \square
Please give this completed form to the Committee aide prior to the start of the meet	ting along with copies of any prepared statement.
THIS FORM IS A GOVERNMENT RECORD AND WILL BE AVA	LABLE TO THE PUBLIC UPON REQUEST.
ASSEMBLY JUDICIARY	COMMITTEE
ASSEMBLI JUDICIAKI	
O(1)	DATE: 12/13
NAME atherine Hunt	
ORGANIZATION REPRESENTED (if any)	nali visible
E-MAIL (OPTIONAL) ichunt 205 @ Vanc	p. com
ADDRESS (OPTIONAL) Monroe 0883/	
TELEPHONE (OPTIONAL) 205821 1209	
WISH TO SPEAK ON BILL NUMBER ACR 205	
PLEASE SUBMIT ONLY ON	E BILL NUMBER PER SLIP
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Speaker will be accorded an opportunity to testify at the Chair's discretion.	NO NEED TO TESTIFY
Please give this completed form to the Committee aide prior to the start of the meeti	no along with copies of any prepared statement

	DATE: 12/13/18
VAME MIChael WVS	or.
ORGANIZATION REPRESENTED (if any)	ocracuis love org
-MAIL (OPTIONAL)	
ADDRESS (OPTIONAL)	
ELEPHONE (OPTIONAL)	
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Speaker will be accorded an opportunity to testify at the Chair's discretion.	NO NEED TO TESTIFY
Please give this completed form to the Committee aide prior to the start of the	meeting along with copies of any prepared statement.
THIS FORM IS A GOVERNMENT RECORD AND WILL BE A	AVAILABLE TO THE PUBLIC UPON REQUEST.
ASSEMBLY JUDICIA	RY COMMITTEE
	DATE: Dec 13,2015
NAME Yarii Rudens Ky	
	enter for Justice
E-MAIL (OPTIONAL)	
ADDRESS (OPTIONAL)	
TELEPHONE (OPTIONAL)	
44.0	
WISH TO SPEAK ON BILL NUMBER PLEASE SUBMIT ON	LY ONE BILL NUMBER PER SLIP
IN FAVOR	Testimony submitted
Speaker will be accorded an opportunity to testify at the Chair's discretion.	NO NEED TO TESTIFY $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$
Please give this completed form to the Committee aide prior to the start of the	ne meeting along with copies of any prepared statement.

AME William Adler	DATE: 12/13/18
RGANIZATION REPRESENTED (if any) Princeton Gerrymandering	Project
-MAIL (OPTIONAL)	
DDRESS (OPTIONAL)	
ELEPHONE (OPTIONAL)	
WISH TO SPEAK ON BILL NUMBER ACR-205	1
PLEASE SUBMIT ONLY ONE BILL NUMBE	R PER SLIP
INFAVOR [] MHave concerns	OPPOSED
Speaker will be accorded an opportunity to testify at the Chair's discretion.	NO NEED TO TESTIFY
Please give this completed form to the Committee aide prior to the start of the meeting along with copies of	f any prepared statement.
THIS FORM IS A GOVERNMENT RECORD AND WILL BE AVAILABLE TO THE 1	PUBLIC UPON REQUEST.