

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME SENATOR TOM KEAN

ORGANIZATION REPRESENTED (if any) \_\_\_\_\_

E-MAIL (OPTIONAL) SENKEAN@NJLEG.ORG

ADDRESS (OPTIONAL) \_\_\_\_\_

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCR-49 / SCR-152 / ACR-205

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 copies of any prepared statement.

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

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13

NAME Jeanne LaCicero *Lochieri*

ORGANIZATION REPRESENTED (if any) ACLU of New Jersey

E-MAIL (OPTIONAL) JLLOCICERO@ACLU-NJ.ORG

ADDRESS (OPTIONAL)

TELEPHONE (OPTIONAL) 973-854-1715

WISH TO SPEAK ON BILL NUMBER SCR 43 + SCR 152

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

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME Eve Neiderganz  
ORGANIZATION REPRESENTED (if any) Princeton Community Democratic Org (PCDO)  
E-MAIL (OPTIONAL) evn864x@gmail.com  
ADDRESS (OPTIONAL)  
TELEPHONE (OPTIONAL)  
WISH TO SPEAK ON BILL NUMBER SCR43/SCR152

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR

OPPOSED

NO NEED TO TESTIFY

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

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME Dena Mottola Jaborska

ORGANIZATION REPRESENTED (if any) New Jersey Citizen Action

E-MAIL (OPTIONAL) \_\_\_\_\_

ADDRESS (OPTIONAL) \_\_\_\_\_

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCR 43 + SCR 152

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

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12-13-18

NAME ~~ST~~ CAROLINE CLEAVES

ORGANIZATION REPRESENTED (if any) PRINCETON COMMUNITY DEMOCRATIC ORG

E-MAIL (OPTIONAL) CAROLINE.CLEAVES@gmail.com

ADDRESS (OPTIONAL) 7 edge hill st Princeton

TELEPHONE (OPTIONAL)

WISH TO SPEAK ON BILL NUMBER SCR 43 / SCR 192

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

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

NAME William Adler DATE: 12/13/18

ORGANIZATION REPRESENTED (if any) Princeton Gerrymandering Project

E-MAIL (OPTIONAL) \_\_\_\_\_

ADDRESS (OPTIONAL) \_\_\_\_\_

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCR-152

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR

Have concerns

OPPOSED

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

**NO NEED TO TESTIFY**

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME William Adler

ORGANIZATION REPRESENTED (if any) Princeton Gerrymandering Project

E-MAIL (OPTIONAL)

ADDRESS (OPTIONAL)

TELEPHONE (OPTIONAL)

WISH TO SPEAK ON BILL NUMBER SCR-43

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR

Have concerns

OPPOSED

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

NO NEED TO TESTIFY

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME Heather Santos  
ORGANIZATION REPRESENTED (if any) NJ Highlands American Promise Assoc.  
E-MAIL (OPTIONAL) heather@sopwith.com  
ADDRESS (OPTIONAL) 252 W. Valley  
TELEPHONE (OPTIONAL) 908-380-0221  
WISH TO SPEAK ON BILL NUMBER SCR43 / SCR152

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

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME Dr. Rozella Clyde

ORGANIZATION REPRESENTED (if any) League of Women Voters Education Chair  
Marshalltown Area League

E-MAIL (OPTIONAL) rozello.clyde@gmail.com

ADDRESS (OPTIONAL) 33 Carmine Street, Chatham, NJ 07928

TELEPHONE (OPTIONAL) 917-355-4451

WISH TO SPEAK ON BILL NUMBER HB 152

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

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME Helen Kioukis

ORGANIZATION REPRESENTED (if any) League of Women Voters of NJ

E-MAIL (OPTIONAL) \_\_\_\_\_

ADDRESS (OPTIONAL) \_\_\_\_\_

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCR 43 + SCR 152

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR

OPPOSED

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME Scott Novakowski

ORGANIZATION REPRESENTED (if any) New Jersey Institute for Social Justice

E-MAIL (OPTIONAL) snovakowski@njisj.org

ADDRESS (OPTIONAL)

TELEPHONE (OPTIONAL) 973-951-0361

WISH TO SPEAK ON BILL NUMBER SCR 152/SCR 43

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

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME Amy Goldsmith / David Pringle

ORGANIZATION REPRESENTED (if any) Clean Water Action

E-MAIL (OPTIONAL) \_\_\_\_\_

ADDRESS (OPTIONAL) \_\_\_\_\_

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCR 43 SCR 152

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR

OPPOSED

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

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME Meredith Meisenheimer  
ORGANIZATION REPRESENTED (if any) South Jersey Women for Progressive Change  
E-MAIL (OPTIONAL) meredith.meisenheimer  
ADDRESS (OPTIONAL)  
TELEPHONE (OPTIONAL)  
WISH TO SPEAK ON BILL NUMBER SCR 43/152

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

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 13 Dec 18

NAME Sally J. Gellert

ORGANIZATION REPRESENTED (if any) UU Faith Action NJ

E-MAIL (OPTIONAL) SJG44@aol.com

ADDRESS (OPTIONAL) Woodcliff Lake

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER \_\_\_\_\_

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**

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12-13-18

NAME Caroline Armstrong

ORGANIZATION REPRESENTED (if any) Indivisible Lambertville - New Hope

E-MAIL (OPTIONAL)

ADDRESS (OPTIONAL)

TELEPHONE (OPTIONAL)

WISH TO SPEAK ON BILL NUMBER SCR 43 / SCR 152

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

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12-13-2018

NAME Brian Lee

ORGANIZATION REPRESENTED (if any) Indivisible Central NJ

E-MAIL (OPTIONAL) unboxed@gmail.com

ADDRESS (OPTIONAL) 108 Krossberry Dr Conerset NJ

TELEPHONE (OPTIONAL)

WISH TO SPEAK ON BILL NUMBER SCR-157

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

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME PATRICK MURRAY

ORGANIZATION REPRESENTED (if any) Monmouth University Polling Institute

MAIL (OPTIONAL)

ADDRESS (OPTIONAL)

TELEPHONE (OPTIONAL)

WISH TO SPEAK ON BILL NUMBER SENATE / SCR 152

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

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 6-13-2018

NAME Brian Lee

ORGANIZATION REPRESENTED (if any) Indivisible Central NJ

E-MAIL (OPTIONAL) unboxed@gmail.com

ADDRESS (OPTIONAL) 108 Kingsberry Dr Somerset NJ

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCR-43 (1R)

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

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: Dec 13

NAME Catherine Hunt

ORGANIZATION REPRESENTED (if any) Monroe Individual

E-MAIL (OPTIONAL) chunt205@gmail.com

ADDRESS (OPTIONAL) 888 31 Monroe

TELEPHONE (OPTIONAL) 205 821 1204

WISH TO SPEAK ON BILL NUMBER SCR 431152

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

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12-13-18

NAME Dan Janowski

ORGANIZATION REPRESENTED (if any) Action Together NJ

E-MAIL (OPTIONAL)

ADDRESS (OPTIONAL)

TELEPHONE (OPTIONAL)

WISH TO SPEAK ON BILL NUMBER SCR 43

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR

OPPOSED

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NO NEED TO TESTIFY

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12-13-18

NAME Dan Janowski

ORGANIZATION REPRESENTED (if any) Action Together NJ

E-MAIL (OPTIONAL) \_\_\_\_\_

ADDRESS (OPTIONAL) \_\_\_\_\_

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCR152

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

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME HERBERT L TARBOUS  
ORGANIZATION REPRESENTED (if any) CENTRAL JERSEY PROGRESSIVE DEMOCRATS  
E-MAIL (OPTIONAL) TARBOUS@GMAIL.COM  
ADDRESS (OPTIONAL) 411 NEW MARKET RD, PISCATAWAY, NJ 08854  
TELEPHONE (OPTIONAL) 212-662-0117  
WISH TO SPEAK ON BILL NUMBER SCR 152

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR

OPPOSED

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NO NEED TO TESTIFY

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: \_\_\_\_\_

NAME Marcia Marley

ORGANIZATION REPRESENTED (if any) Blue Wave NJ

E-MAIL (OPTIONAL) marciam@bluewavenj.org

ADDRESS (OPTIONAL) \_\_\_\_\_

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCR 152

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR

OPPOSED

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NO NEED TO TESTIFY

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME Heidi Wilenius (Wilenius)

ORGANIZATION REPRESENTED (if any) \_\_\_\_\_

E-MAIL (OPTIONAL) hwilenius@gmail.com

ADDRESS (OPTIONAL) 93 West Prospect St Hopewell NJ 08525

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCR 43 / SCR 152

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR

OPPOSED

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME William F. Griffith, Jr.

ORGANIZATION REPRESENTED (if any) -

E-MAIL (OPTIONAL) bill@griffeth.name

ADDRESS (OPTIONAL) 264 W. Dudley Ave., Westfield NJ 07090

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCR 152

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR

OPPOSED

NO NEED TO TESTIFY

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME William F. Griffeth, Jr.

ORGANIZATION REPRESENTED (if any) —

E-MAIL (OPTIONAL) bill@griffeth.name

ADDRESS (OPTIONAL) 264 W. Dudley Ave, Westfield NJ 07090

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCR 43

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR

OPPOSED

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NO NEED TO TESTIFY

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12-13-18

NAME JEAN-MARIE DONOHUE

ORGANIZATION REPRESENTED (if any) WATERSPIRIT

E-MAIL (OPTIONAL) JMDONOHUE26@gmail.com

ADDRESS (OPTIONAL) \_\_\_\_\_

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCR43 / SCR152

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

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 2018-12-13

NAME Timothy Larkin

ORGANIZATION REPRESENTED (if any) \_\_\_\_\_

MAIL (OPTIONAL) \_\_\_\_\_

ADDRESS (OPTIONAL) \_\_\_\_\_

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCR152

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

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME Matthew Skeete

ORGANIZATION REPRESENTED (if any) Our Revolution - Essex County NJ

E-MAIL (OPTIONAL) matthew.skeete@gmail.com

ADDRESS (OPTIONAL) 82 Stewart Place, South Orange NJ 07079

TELEPHONE (OPTIONAL) 972-996-8271

WISH TO SPEAK ON BILL NUMBER SCR-43 (1R)

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

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME Liz Glynn

ORGANIZATION REPRESENTED (if any) NJ Forward

E-MAIL (OPTIONAL) liz a glynn@gmail.com

ADDRESS (OPTIONAL) 62 Bustanmat St. Lambertville, NJ 08530

TELEPHONE (OPTIONAL) 732-670-5152

WISH TO SPEAK ON BILL NUMBER SCR-43 & SCR-152

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

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/2018

NAME Ann Rea

ORGANIZATION REPRESENTED (if any) \_\_\_\_\_

E-MAIL (OPTIONAL) area197@gmail.com

ADDRESS (OPTIONAL) 1 shale lane Clifton

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCR 152/43 *testifying*

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR

OPPOSED

~~NO NEED TO TESTIFY~~

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE:

12/13/18

NAME

Heather Marks

ORGANIZATION REPRESENTED (if any)

E-MAIL (OPTIONAL)

heathermarks@outlook.com

ADDRESS (OPTIONAL)

91 Meadowbrook Rd.

TELEPHONE (OPTIONAL)

WISH TO SPEAK ON BILL NUMBER

SCR-02 SCR-03

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

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12-13-18

NAME Ingrid Reed (retired from directing The New Jersey

Project at The Eagleton Institute)

ORGANIZATION REPRESENTED (if any) \_\_\_\_\_

E-MAIL (OPTIONAL) IWReed@aol.com

ADDRESS (OPTIONAL) \_\_\_\_\_

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER

SCR 152

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

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME Laura Zurlin Legal Women Voters of NJ

ORGANIZATION REPRESENTED (if any) LWV NJ - Represent US

E-MAIL (OPTIONAL) Zurlins18@gmail.com

ADDRESS (OPTIONAL) 19 Banker Hill Cranbury, NJ

TELEPHONE (OPTIONAL) (609) 915-6261

WISH TO SPEAK ON BILL NUMBER SCR 1527 43

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 copies of any prepared statement.

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

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME Richard L. Bye Jr <sup>Bye</sup>

ORGANIZATION REPRESENTED (if any) LWV League Women Voters

E-MAIL (OPTIONAL)

ADDRESS (OPTIONAL) 2 Edgell Ave, Morristown, NJ 07960

TELEPHONE (OPTIONAL)

WISH TO SPEAK ON BILL NUMBER SCR 43, SCR 152

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR

OPPOSED

NO NEED TO TESTIFY

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 with copies of any prepared statement.

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

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME SEAN SMITH

ORGANIZATION REPRESENTED (if any) Over Revolution Union County

HOME MAIL (OPTIONAL)

ADDRESS (OPTIONAL)

TELEPHONE (OPTIONAL)

WISH TO SPEAK ON BILL NUMBER SCR 43 / SCR 152

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 copies of any prepared statement.

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

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: Dec 13

NAME Sue Altman

ORGANIZATION REPRESENTED (if any) South Jersey Women for Progressive Change

E-MAIL (OPTIONAL) SCALTMAN@gmail.com

ADDRESS (OPTIONAL) 326 Point St Camden

TELEPHONE (OPTIONAL) 908-625-9636

WISH TO SPEAK ON BILL NUMBER 47/152

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 copies of any prepared statement.

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

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12.13.18

NAME Joni Gilton

ORGANIZATION REPRESENTED (if any) League of Women Voters NJ

E-MAIL (OPTIONAL) joni.gg@gmail.com

ADDRESS (OPTIONAL)

TELEPHONE (OPTIONAL)

WISH TO SPEAK ON BILL NUMBER SCR43 / SCR 152 ACR60 / ACR205

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 copies of any prepared statement.

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

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: \_\_\_\_\_

NAME Doug O'Malley

ORGANIZATION REPRESENTED (if any) Environment New Jersey

E-MAIL (OPTIONAL) \_\_\_\_\_

ADDRESS (OPTIONAL) \_\_\_\_\_

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCR-152 / SCR-43

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 copies of any prepared statement.

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

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME David Goodman

ORGANIZATION REPRESENTED (if any) Represent Us / Central NJ

E-MAIL (OPTIONAL) Represent Us / Central NJ

ADDRESS (OPTIONAL)

TELEPHONE (OPTIONAL)

WISH TO SPEAK ON BILL NUMBER SCR 152 / SCR 43

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 copies of any prepared statement.

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



SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/8/18

NAME RONALD K. CITEN

ORGANIZATION REPRESENTED (if any) ACLU of NJ

E-MAIL (OPTIONAL) RONCITEN NJ @ GMAIL . COM

ADDRESS (OPTIONAL)

TELEPHONE (OPTIONAL)

WISH TO SPEAK ON BILL NUMBER SCR 152

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR

OPPOSED

NO NEED TO TESTIFY

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 with copies of any prepared statement.

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

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME Yuriy Rudensky

ORGANIZATION REPRESENTED (if any) Brennan Center for Justice at

E-MAIL (OPTIONAL) NYU School of Law

ADDRESS (OPTIONAL)

TELEPHONE (OPTIONAL)

WISH TO SPEAK ON BILL NUMBER SCR152 & SCR43

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 copies of any prepared statement. *Written testimony submitted*

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

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

NAME Ronald W. Pierce DATE: 12/13/18

ORGANIZATION REPRESENTED (if any) New Jersey Institute for Social Justice

E-MAIL (OPTIONAL) rpierce@njisj.org

ADDRESS (OPTIONAL)

TELEPHONE (OPTIONAL)

WISH TO SPEAK ON BILL NUMBER S 152 + 43 (same bill)

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR

OPPOSED

NO NEED TO TESTIFY

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 with copies of any prepared statement.

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

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

NAME SANDRA PERSICHETTI DATE: 12-13-18

ORGANIZATION REPRESENTED (if any) League of Women Voters

E-MAIL (OPTIONAL) sdpersv22@gmail.com

ADDRESS (OPTIONAL) 2 Hamletta Rd, Apt 2D, Merristown 07960

TELEPHONE (OPTIONAL)

WISH TO SPEAK ON BILL NUMBER SCR 43 + SCR 152

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR

OPPOSED

NO NEED TO TESTIFY

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 with copies of any prepared statement.

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

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/2018

NAME CECILE KENT  
ORGANIZATION REPRESENTED (if any) LEAGUE OF WOMEN VOTERS  
E-MAIL (OPTIONAL) cece@cecekent.com  
ADDRESS (OPTIONAL)  
TELEPHONE (OPTIONAL)  
WISH TO SPEAK ON BILL NUMBER SCR 43 / SCR 152

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR

OPPOSED

NO NEED TO TESTIFY

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 with copies of any prepared statement.

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

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12-13-18

NAME Jill Lewis-Spector

ORGANIZATION REPRESENTED (if any) League of Women Voters of NJ

E-MAIL (OPTIONAL) jlewisprof1@yahoo.com

ADDRESS (OPTIONAL) 204 Lincoln Ave., Highland Park, NJ 08904

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCR43/SCR152

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR

OPPOSED

NO NEED TO TESTIFY

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 with copies of any prepared statement.

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

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME Karen Kanfer

ORGANIZATION REPRESENTED (if any) League of Women Voters

E-MAIL (OPTIONAL) \_\_\_\_\_

ADDRESS (OPTIONAL) \_\_\_\_\_

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCR 43/SCR 152

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 copies of any prepared statement.

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

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME Ethel Reid

ORGANIZATION REPRESENTED (if any) League of Women Voters

E-MAIL (OPTIONAL) ereid36@aol.com

ADDRESS (OPTIONAL)

TELEPHONE (OPTIONAL) 732-826-0944

WISH TO SPEAK ON BILL NUMBER SCR43 / SCR 152

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR

OPPOSED

**NO NEED TO TESTIFY**

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 with copies of any prepared statement.

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



SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: \_\_\_\_\_

NAME Katie Wertheimer

ORGANIZATION REPRESENTED (if any) Planned Parenthood Action Fund NJ

E-MAIL (OPTIONAL) \_\_\_\_\_

ADDRESS (OPTIONAL) \_\_\_\_\_

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCR43/152

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR

OPPOSED

NO NEED TO TESTIFY

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 with copies of any prepared statement.

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

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME ELIZABETH MORGAN

ORGANIZATION REPRESENTED (if any) LAURENCE LEAGUE OF WOMEN VOTERS

E-MAIL (OPTIONAL) \_\_\_\_\_

ADDRESS (OPTIONAL) 38 PINE KNOLL DR LAURENCEVILLE, N.J.

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCR 152 ~~443~~

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 copies of any prepared statement.

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

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12-13-18

NAME Susan Pironi  
ORGANIZATION REPRESENTED (if any) League of Women Voters of Sussex Highlands  
E-MAIL (OPTIONAL) susanpironi@hotmail.com  
ADDRESS (OPTIONAL) 66 Sussex Mills Rd Sparta  
TELEPHONE (OPTIONAL) 973-729-9294  
WISH TO SPEAK ON BILL NUMBER SCR 431 SCR 152

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR

OPPOSED

NO NEED TO TESTIFY

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 with copies of any prepared statement.

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

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME Sally Maruca

ORGANIZATION REPRESENTED (if any) L W V Lawrence Sup

EMAIL (OPTIONAL) sallymaruca@gmail.com

ADDRESS (OPTIONAL)

TELEPHONE (OPTIONAL)

WISH TO SPEAK ON BILL NUMBER No need to speak - Bill # SC 152 & 43

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR

OPPOSED

NO NEED TO TESTIFY

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 with copies of any prepared statement.

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

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12.13.18

NAME Nicole Plett

ORGANIZATION REPRESENTED (if any) League of Women Voters of Lawrence Twp.

E-MAIL (OPTIONAL) NBPLETT@YAHOO.COM

ADDRESS (OPTIONAL) Lawrence Twp. NJ 08648

TELEPHONE (OPTIONAL)

WISH TO SPEAK ON BILL NUMBER SCR 152 + SCR 43

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR

OPPOSED

NO NEED TO TESTIFY

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 with copies of any prepared statement.

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

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME Michael Wilson

ORGANIZATION REPRESENTED (if any) democracyislove.org

E-MAIL (OPTIONAL) \_\_\_\_\_

ADDRESS (OPTIONAL) \_\_\_\_\_

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SR 152

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 copies of any prepared statement.

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

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12-13-18

NAME Shoshana Osolfsky

ORGANIZATION REPRESENTED (if any) Allied for the American Promise

E-MAIL (OPTIONAL) allied4theamericanpromise@gmail.com

ADDRESS (OPTIONAL) 1109 Buchshutem Rel, Bldgm 08302

TELEPHONE (OPTIONAL) 609-334-7082

WISH TO SPEAK ON BILL NUMBER SCR 152

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 copies of any prepared statement.

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

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

NAME Carol E. Gay DATE: 12/13/18  
ORGANIZATION REPRESENTED (if any) NJ State Industrial Union  
E-MAIL (OPTIONAL) Carolgay747@aol.com Council  
ADDRESS (OPTIONAL) Brick NJ 08724  
TELEPHONE (OPTIONAL) 732 616-1751  
WISH TO SPEAK ON BILL NUMBER SCR 43 SCR 152

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 copies of any prepared statement.

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



SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME Alissa Wolf

ORGANIZATION REPRESENTED (if any) \_\_\_\_\_

E-MAIL (OPTIONAL) awolf74039@aol.com

ADDRESS (OPTIONAL) \_\_\_\_\_

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCR43/SCR152

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 copies of any prepared statement.

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

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME Kevin John Tardoc

ORGANIZATION REPRESENTED (if any) \_\_\_\_\_

E-MAIL (OPTIONAL) \_\_\_\_\_

ADDRESS (OPTIONAL) \_\_\_\_\_

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCR 43

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 copies of any prepared statement.

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

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 2018-12-13

NAME Joseph Mangano

ORGANIZATION REPRESENTED (if any) \_\_\_\_\_

E-MAIL (OPTIONAL) \_\_\_\_\_

ADDRESS (OPTIONAL) \_\_\_\_\_

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCR152

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 copies of any prepared statement.

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

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

NAME Kathleen Jerome

DATE: 2018-12-13

ORGANIZATION REPRESENTED (if any) \_\_\_\_\_

E-MAIL (OPTIONAL) \_\_\_\_\_

ADDRESS (OPTIONAL) \_\_\_\_\_

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCR 152

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR

OPPOSED

NO NEED TO TESTIFY

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 with copies of any prepared statement.

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

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 2018-12-13

NAME Sharon Podsedce

ORGANIZATION REPRESENTED (if any) \_\_\_\_\_

E-MAIL (OPTIONAL) \_\_\_\_\_

ADDRESS (OPTIONAL) \_\_\_\_\_

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCA152

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 copies of any prepared statement.

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

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 2018-12-13

NAME Leslie Kasser Schraer

ORGANIZATION REPRESENTED (if any) \_\_\_\_\_

E-MAIL (OPTIONAL) \_\_\_\_\_

ADDRESS (OPTIONAL) \_\_\_\_\_

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCR152

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 copies of any prepared statement.

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

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 2018-12-13

NAME Alexis Larkin

ORGANIZATION REPRESENTED (if any) \_\_\_\_\_

MAIL (OPTIONAL) \_\_\_\_\_

ADDRESS (OPTIONAL) \_\_\_\_\_

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCR 152

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 copies of any prepared statement.

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

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 13 December 2018

NAME Lynn Kaiser

ORGANIZATION REPRESENTED (if any) \_\_\_\_\_

E-MAIL (OPTIONAL) \_\_\_\_\_

ADDRESS (OPTIONAL) \_\_\_\_\_

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER OCR 43 SCR 152

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 copies of any prepared statement.

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



SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: \_\_\_\_\_

NAME Teresa Stimpfel

ORGANIZATION REPRESENTED (if any) \_\_\_\_\_

E-MAIL (OPTIONAL) \_\_\_\_\_

ADDRESS (OPTIONAL) 328 Andover Pl Robbinsville NJ

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCR 152 + 43

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 copies of any prepared statement.

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

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE:

12/13/18

NAME

Nickole Forbes

ORGANIZATION REPRESENTED (if any)

E-MAIL (OPTIONAL)

Nickole Forbes (a) hotmail.com

ADDRESS (OPTIONAL)

434 Groggston Rd. Belle Meade 08502

TELEPHONE (OPTIONAL)

WISH TO SPEAK ON BILL NUMBER

SCR 43

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR

OPPOSED

**NO NEED TO TESTIFY**

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 with copies of any prepared statement.

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

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME: Theresa Winegar

ORGANIZATION REPRESENTED (if any) NJGOP

E-MAIL (OPTIONAL) theresa@njgop.org

ADDRESS (OPTIONAL)

TELEPHONE (OPTIONAL) 609-989-7300

WISH TO SPEAK ON BILL NUMBER SCR43 / SCR152 / ACR205

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 copies of any prepared statement.

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

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12-10-18

NAME Tony Gierdano

ORGANIZATION REPRESENTED (if any) UUCMC

E-MAIL (OPTIONAL) \_\_\_\_\_

ADDRESS (OPTIONAL) \_\_\_\_\_

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER \_\_\_\_\_

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR

OPPOSED

SCR-102  
SCR-49

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 AVAILABLE TO THE PUBLIC UPON REQUEST.

SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/3/13

NAME William Powell

ORGANIZATION REPRESENTED (if any) March On Trenton

E-MAIL (OPTIONAL)

ADDRESS (OPTIONAL)

TELEPHONE (OPTIONAL)

WISH TO SPEAK ON BILL NUMBER SCR-43

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

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME Kyle Moore

ORGANIZATION REPRESENTED (if any) March Co Trenton

E-MAIL (OPTIONAL) \_\_\_\_\_

ADDRESS (OPTIONAL) 3202 Concord Drive, Cinnaminson

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCR-43

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

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME Rhyan Grech

ORGANIZATION REPRESENTED (if any) Pinelands Preservation Alliance

E-MAIL (OPTIONAL)

ADDRESS (OPTIONAL)

TELEPHONE (OPTIONAL)

WISH TO SPEAK ON BILL NUMBER SCR 43

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

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

NAME Rhyan Grech DATE: 12/13/18

ORGANIZATION REPRESENTED (if any) Pinelands Preservation Alliance

E-MAIL (OPTIONAL) \_\_\_\_\_

ADDRESS (OPTIONAL) \_\_\_\_\_

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SR 152

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

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

NAME Jeff Grundy DATE: 12/13/18

ORGANIZATION REPRESENTED (if any) \_\_\_\_\_

E-MAIL (OPTIONAL) jeffgrundy@comcast.net

ADDRESS (OPTIONAL) \_\_\_\_\_

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCR43/ SCR152

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**

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

NAME Stefani Kasdin DATE: 12/13/18

ORGANIZATION REPRESENTED (if any) \_\_\_\_\_

E-MAIL (OPTIONAL) stefani.kasdin@aim.com

ADDRESS (OPTIONAL) \_\_\_\_\_

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCR 43 / SCR 152

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR

OPPOSED

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

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**NO NEED TO TESTIFY**

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME Andrea Kane

ORGANIZATION REPRESENTED (if any) \_\_\_\_\_

E-MAIL (OPTIONAL) AKPIX@aol.com

ADDRESS (OPTIONAL) \_\_\_\_\_

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCR 43 / SCR 152

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR

OPPOSED

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

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

NAME Carol O'Neil DATE: 12/13/18

ORGANIZATION REPRESENTED (if any) \_\_\_\_\_

E-MAIL (OPTIONAL) carol.oneill-57@gmail.com

ADDRESS (OPTIONAL) 228 Belle Arbor Dr. Cherry Hill, NJ 08004

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCR43 / SCR152

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

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME Lillian Wolfe

ORGANIZATION REPRESENTED (if any) \_\_\_\_\_

E-MAIL (OPTIONAL) Lillianwolfe@comcast.net

ADDRESS (OPTIONAL) West Deptford, NJ 08084

TELEPHONE (OPTIONAL) \_\_\_\_\_

WISH TO SPEAK ON BILL NUMBER SCR 43 / SCR 152

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**

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SENATE STATE GOVERNMENT, WAGERING, TOURISM & HISTORIC PRESERVATION  
COMMITTEE

DATE: 12/13/18

NAME Andrea Mastro

ORGANIZATION REPRESENTED (if any) \_\_\_\_\_

E-MAIL (OPTIONAL) amastro3@yahoo.com

ADDRESS (OPTIONAL) \_\_\_\_\_

TELEPHONE (OPTIONAL) 609 827 4155

WISH TO SPEAK ON BILL NUMBER SCR 431 SCR 152

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**

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