

PLEASE PRINT LEGIBLY (or attach your business card)

(NOTE: The Rules of the House require "the name and address of each person, together with the name and address of the person, association on whose behalf the appearance is made".)

TESTIFIER'S NAME	TESTIFIER'S ADDRESS	APPEARING ON BEHALF OF (Name of Organization)	BILL NUMBER	ADDRESS OF ORGANIZATION	PHONE NUMBER:
John Doe	1234 5 th Ave E Suite #301 St Paul, MN 55155	Minnesota Association of Does	HF XXX	100 Constitution Ave St Paul, MN 55155	651-555-1234
RaeAnna Lee	(work address) 1107 Hazeltine Blvd. Chaska, MN 55318	Americans for Prosperity	HF 308 HF 4	(Home address) 3570 Dakota Ave. Woodbury, MN 55125	612 220- 0146
"	"	N/A (personal support)	HF 18	"	"
Sara Gangelhoff	Coon Rapids, MN	Women's Foundation of MN	HF 18	Minneapolis, MN	
Maggie Hangge	St. Paul, MN	Minnesota Catholic conference	HF 18	St. Paul, MN	
Nan Madden	2314 University Ave W #20 St. Paul MN 55114	Minnesota Budget Project	HF 4	same	651-757- 3084
Eric Bernstein	315 W. 35 th St. Minneapolis, MN 55408	We Make MN	HF 4	St. Paul, MN	718-757-4277