Co-Chair Vernon Sykes, Representative 34th House District



Co-Chair William G. Batchelder, Speaker 69th House District

Witness Information Form

Please Complete the Witness Information Form Before Testifying Name: Sichard N Coglienese Organization (If Applicable): Ohio Atty General Position/title: Principal Assistant AG Address: 30 E. Bril Street City: <u>Colombos</u> State: 04/ Zip: 4) 215 Telephone: 6/4 466 2872 Email: Richard, Costlanese @ Obse attring several, por Are You Representing: Yourself_____ Organization_____ Do You Wish to Testify On: Subject matter: Do you have a written statement, visual aids, or other material to distribute? Yes No____ (If yes, please provide copies to the Chairman or Committee Clerk) How much time will your testimony require? • Committee Chair may limit testimony in the interest of time