

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/00

BILL NO. AB 630

OR

SUBJECT Personal Care

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/00

BILL NO. AB 630

OR

SUBJECT _____

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/00

BILL NO. AB 630

OR

SUBJECT PERSONAL CARE

(NAME) Dennis Hansen

(Street Address or Route Number) W7502 S E O TRUIM RD

(City and Zip Code) Darien WI 53115

(Representing) Lutheran Social Services

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Senate Sergeant-At-Arms
State Capitol - B35 South
P.O.Box 7882
Madison, WI 53707-7882

(NAME) REP MARY MEYER

(Street Address or Route Number) 1623 Sunset DR

(City and Zip Code) LA Crosse WI

(Representing) AD 95

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
P.O.Box 7882
Madison, WI 53707-7882

(NAME) DOE MARKMAN/ LITA SENGEL

(Street Address or Route Number) 300 N. Main ST

(City and Zip Code) LA CROSSE WI

(Representing) LA CROSSE COUNTY

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
P.O.Box 7882
Madison, WI 53707-7882

WE NEED TO LEAVE BY 3:15 PM

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/2000

BILL NO. AB630

OR

SUBJECT See Personal Exp

(NAME)

Walt DePinto Jr

(Street Address or Route Number)

117 Colorado Ct

(City and Zip Code) Madison WI 53704

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: February 2, 2000

BILL NO. A.B. 630

OR

SUBJECT Personal Care

Reimbursements

(NAME)

Rev. Sue Maline Johnson

(Street Address or Route Number)

322 E. Wackerlyton

(City and Zip Code) Madison, WI 53703-2834

(Representing) Lutheran Office for Public Policy

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. 630

OR

SUBJECT See personal

care

(NAME)

Vinton Good

(Street Address or Route Number)

2111 Ash Westbrook

(City and Zip Code) Madison WI 53711

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 02/02/00

BILL NO. 630

OR

SUBJECT _____

Michael Steinhauer
(NAME)
600 Williamson
(Street Address or Route Number)

Madison
(City and Zip Code)

Wis. Occupational Therapy
(Representing) ASSN

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/00

BILL NO. AB630

OR

SUBJECT Save Person /

Care

Gary Stock
(NAME)
2071 Winebag
(Street Address or Route Number)

Madison 53704
(City and Zip Code)

Myself & Jack Rickett
(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

Please return this slip to a messenger PROMPTLY

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State Capitol - B35 South
P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/00

BILL NO. _____

OR

SUBJECT Save Personal Care

Teri Black
(NAME)
(Street Address or Route Number)

1106 Doster Rd, Madison
(City and Zip Code)

Wisconsin Occupational Therapy Assoc.
(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

Please return this slip to a messenger PROMPTLY

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State Capitol - B35 South
P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. _____

OR

SUBJECT Save Mrs. Lane

Melenka Ewing
(NAME)

3815 Galia Way
(Street Address or Route Number)

Cottage Grove
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Attending
Speaking for information only; Neither for nor against:

Please return this slip to a messenger PROMPTLY.

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State Capitol - B35 South
P.O.Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 02-02-00

BILL NO. _____

OR

SUBJECT Save

Personal Care

Heidi Olson
(NAME)

22 Box 23
(Street Address or Route Number)

Westby, WI 54607
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: _____

BILL NO. _____

OR

SUBJECT Save

Personal Care

Frances Ricknell
(NAME)

9 Back St
(Street Address or Route Number)

Madison
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/00

BILL NO. _____

OR

SUBJECT Selling Personal Care

Raymond M. Roder

(NAME)

22 E. M. F. Lin St, Suite 600

(Street Address or Route Number)

Madison, WI 53701-2020

(City and Zip Code)

(Representing) CLM to Vernon County & B. H. M.

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____

OR

SUBJECT See Personal Care

Karen Mellemberg

(NAME)

309 South St

(Street Address or Route Number)

(City and Zip Code) Cambridge WI 53523

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

Please return this slip to a messenger PROMPTLY

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/00

BILL NO. _____

OR

SUBJECT Personal Care

Penelope Jackson

(NAME)

2028 Tree Lane

(Street Address or Route Number)

(City and Zip Code) Madison WI 53711

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____
OR
SUBJECT Personal Care

Erica Dresden
(NAME) Appt F
7109 Flower Ln
(Street Address or Route Number)
Madison, WI 53717
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. _____
OR
SUBJECT Personal Care

Jo Tresley
(NAME) 2910 Oak Lawn Rd.
(Street Address or Route Number)
Stoughton, WI 53589
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/00

BILL NO. _____
OR
SUBJECT Save Personal Care

Karen Dittman
(NAME) 1311 Park Circle
(Street Address or Route Number)
SUN Prairie WI
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 7/27/00

BILL NO. _____

OR

SUBJECT Personal Care

(NAME) Mr Bork
413 S 3rd BALK RIVER FALLS WI.
(Street Address or Route Number) 54665
(City and Zip Code)

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 7-2-2000

BILL NO. _____

OR

SUBJECT Personal Care

(NAME) Tenna Trestley
2910 Oak Lawn Rd.
(Street Address or Route Number) Stoughton WI 53589
(City and Zip Code)

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 7/2/00

BILL NO. _____

OR

SUBJECT Against 14th
Article

(NAME) Michelle Joyce
Alpen
(Street Address or Route Number) 53705
(City and Zip Code)

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2

BILL NO. _____

OR

SUBJECT Save Personnel Care

Save Personnel Care

Liz Hecht

(NAME)

1483 Sunnyside

(Street Address or Route Number)

Belleville, WI

(City and Zip Code)

Self

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against: Written testimony

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____

OR

SUBJECT Save PC

Save PC

TO Maddox

(NAME)

2051 Allen Blvd

(Street Address or Route Number)

Middleton WI

(City and Zip Code)

53562

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2002

BILL NO. _____

OR

SUBJECT save personal care

save personal care

Mary L. Vetsell

(NAME)

5822 Russell Rd #1

(Street Address or Route Number)

MADISON WI 53711

(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

Please return this slip to a messenger PROMPTLY

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State Capitol - B35 South
P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/00

BILL NO. _____

OR

SUBJECT Selling Personal care

Michelle Wetzel

(NAME)

5238 Russett Rd #2

(Street Address or Route Number)

Madison, WI 53711

(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. _____

OR

SUBJECT Save personal care

(NAME)

Michael A. Joyce

(Street Address or Route Number)

4 North Allen St

(City and Zip Code)

MADISON WI 53705

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/2000

BILL NO. _____

OR

SUBJECT Safe Personal

care

Henry G Hendrickson

(NAME)

347 S. Lincoln Ave

(Street Address or Route Number)

Wiscasset, ME 03985

(City and Zip Code)

AAAP

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/00

BILL NO. _____
OR
SUBJECT Personal Care

Cindy Royce
(NAME)
793 Arabian Ct.
(Street Address or Route Number)
Sun Prairie, WI 53590
(City and Zip Code)

(Representing) _____
Speaking in Favor:
Speaking Against:
Registering in Favor:
but not speaking:
Registering Against:
but not speaking:
Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____
OR
SUBJECT Save Personal

Sandra K. Gilbert
(NAME)
2444 Chalef Gardens Ct
(Street Address or Route Number)
Madison 53711
(City and Zip Code)

(Representing) _____
Speaking in Favor:
Speaking Against:
Registering in Favor:
but not speaking:
Registering Against:
but not speaking:
Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____
OR
SUBJECT Save PC

Sandra Bahling
(NAME)
2444 Chalef Gardens Ct
(Street Address or Route Number)
Madison 53711
(City and Zip Code)

(Representing) _____
Speaking in Favor:
Speaking Against:
Registering in Favor:
but not speaking:
Registering Against:
but not speaking:
Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. _____

OR _____

SUBJECT Save Personal

Case

Edwina Steussy

(NAME) _____

2922 SACHS ST

(Street Address or Route Number)

MADISON WI

(City and Zip Code)

Self
(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor: _____

but not speaking:

Registering Against: _____

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/00

BILL NO. _____

OR _____

SUBJECT Save Personal

Case

Marvyn Wilson

(NAME) _____

6105 Raymond Rd.

(Street Address or Route Number)

Madison, WI 53711

(City and Zip Code)

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor: _____

but not speaking:

Registering Against: _____

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
P.O.Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____

OR _____

SUBJECT _____

Howard Seifert

(NAME) _____

1517 Dayridge Dr,

(Street Address or Route Number)

Madison, WI 53704

(City and Zip Code)

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor: _____

but not speaking:

Registering Against: _____

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: Feb 2, 2000

BILL NO. _____
OR _____

SUBJECT Personal Care

(NAME) Linda Beckley

(Street Address or Route Number) PO Box 226

(City and Zip Code) Mineral Point WI 53565

(Representing) Self + Son

Speaking in Favor:

Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: Feb 2, 2000

BILL NO. _____
OR _____

SUBJECT Save Personal Care

(NAME) Debra Gillman

(Street Address or Route Number) W5809 St Hwy 33

(City and Zip Code) La Crosse WI 54601

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information only; Neither for nor against:

Please return this slip to a messenger PROMPTLY

Senate Sergeant-At-Arms
State Capitol - B35 South
P.O.Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/02

BILL NO. _____
OR _____

SUBJECT Personal Care

(NAME) WALTER J SERPOT

(Street Address or Route Number) 1010 St W 5185T

(City and Zip Code) BEAUSHA COUNTY

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information only; Neither for nor against:

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Senate Sergeant-At-Arms
State Capitol - B35 South
P.O.Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. _____

OR

SUBJECT Personal Care

(NAME) Russell King

(Street Address or Route Number) 510 Medical Circle #33

(City and Zip Code) Madison WI 53719

(Representing) Miss Homecare Organizers

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/00

BILL NO. _____

OR

SUBJECT _____

(NAME) Kris Lawson Steig

(Street Address or Route Number) 2127 Grandview Pl

(City and Zip Code) LA Cross, WI 57601

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

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DATE: 2-2-2000

BILL NO. _____

OR

SUBJECT Serving Personal Care

(NAME) Andrey L. Britner

(Street Address or Route Number) 150 South Street

(City and Zip Code) Sun Prairie Wis. 53580

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/02

BILL NO. _____

OR

SUBJECT Personal Care Bill

(NAME) Mark Thompson

(Street Address or Route Number) 20 River Place Suite 101

Madison WI 53713

(City and Zip Code)

(Representing) WI Nurses Assoc.

Speaking in Favor: Bill

Speaking Against: Robert

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
P.O.Box 7882
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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2002

BILL NO. Save Personal

OR

SUBJECT dare

(NAME) Jean Klausia

(Street Address or Route Number) 1012 Abbey Lane

Viroqua WI 54605

(City and Zip Code)

(Representing) Vernon Co. Human Services

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2.2.00

BILL NO. _____

OR

SUBJECT Personal Care

(NAME) Senator Brian Rude

(Street Address or Route Number) W/Rep. Johnson

(City and Zip Code) 3rd Senate District

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
P.O.Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/00

BILL NO. _____
OR _____

SUBJECT Save Personal Care

(NAME) Barbara Vander

(Street Address or Route Number) 2314 E Bayton

(City and Zip Code) Madison 53704

(Representing) Alderwoman pleads to go to and Homeatins

Speaking in Favor:

Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/2000

BILL NO. _____
OR _____

SUBJECT Save Personal Care

(NAME) Lila Seeger

(Street Address or Route Number) W 5856 Carlack Ct.

(City and Zip Code) Sheddard, WI 54658

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/00

BILL NO. _____
OR _____

SUBJECT Personal Care

(NAME) Jana Pavlik

(Street Address or Route Number) Box 118

(City and Zip Code) Prairie du Rocher WI

(Representing) Orange County, IA

Speaking in Favor:

Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/80

BILL NO. _____

OR

SUBJECT SPUR PERSONAL CARE

BOB MICHAELS

(NAME)

65 E. KEVY

(Street Address or Route Number)

TEMPLE, AZ 85284

(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-80

BILL NO. _____

OR

SUBJECT SPUR PERSONAL CARE

MANVOLD

(NAME)

20755 S. LAIBER BLVD

(Street Address or Route Number)

MILWAUKEE WI 53215

(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: Feb. 2, 1980

BILL NO. _____

OR

SUBJECT SPUR PERSONAL CARE

Ginger A. Reimer

(NAME)

(Street Address or Route Number)

600 W. Virginia Suite 301

(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2006

BILL NO. _____
OR
SUBJECT Save Personal Care

Lynn Jenkins
(NAME)

154 W. Court
(Street Address or Route Number)

Princeton Wisconsin 53881
(City and Zip Code)

Wisconsin Care Givers
(Representing)

Speaking in Favor:
Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 5-2-02

BILL NO. _____
OR
SUBJECT In Favor of Personal Care

Mark Leubberg
(NAME)

614. So. Rock Hill
(Street Address or Route Number)

Chicago IL 60645
(City and Zip Code)

Behind the Scenes Fine
(Representing)

Speaking in Favor:
Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/2000

BILL NO. _____
OR
SUBJECT SALE PERSONAL CARE

NANCY ANDERSON
(NAME)

4715 YAKKAX DR
(Street Address or Route Number)

MCFARLAND 53553
(City and Zip Code)

(Representing)

Speaking in Favor:
Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/21/00

BILL NO. _____

OR

SUBJECT MA PERSONAL CARE

Care

Jean RUMACHIK

(NAME)

6959-88th Ave.

(Street Address or Route Number)

Kenosha WI 53142

(City and Zip Code)

Society's Assets + WPSA

(Representing)

Speaking in Favor:

SAVR Personal Care

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____

OR

SUBJECT SAVE PERSONAL CARES

STEVIE MERRITTIS

(NAME)

14454 KUSSMAUL

(Street Address or Route Number)

MT. HOPE 53816

(City and Zip Code)

WPSA / LOREL KNAAP, INC.

(Representing)

Speaking in Favor:

PROVIDER PRAISE

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____

OR

SUBJECT Personal Care

Cheryl Otten

(NAME)

4328 Norman Carter Rd.

(Street Address or Route Number)

La Crosse WI 54601

(City and Zip Code)

CONSUMER

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/2000

BILL NO. _____

OR

SUBJECT SAVE PERSONAL

CARE

(NAME) DEVIN GRUSZYNSKI

217 White Hall

(Street Address or Route Number)

(City and Zip Code) Whitehall WI 53190?

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/2000

BILL NO. SAVE PERSONAL

OR

SUBJECT CARE

(NAME) GERY BOER

REC WISCONSIN

(Street Address or Route Number)

(City and Zip Code) MADISON, WI

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/2000

BILL NO. SAVE PERSONAL

OR

SUBJECT CARE

(NAME) STANLEY NOFSINGER

62077 2000

(Street Address or Route Number)

(City and Zip Code) WILKES BARRE PA 18702

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/00

BILL NO. _____

OR

SUBJECT Save Personal Care

Care

(NAME) Betsy Cullerton

(Street Address or Route Number)

1036 Hillview Dr. #107B

(City and Zip Code) Waukegan WI 53190

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/3/2000

BILL NO. _____

OR

SUBJECT Save Personal Care

Care

(NAME) Gene Christensen

(Street Address or Route Number)

W. Main

(City and Zip Code) Waukegan 53703

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____

OR

SUBJECT Personal Care

Care

(NAME) Craig A. Hams

(Street Address or Route Number)

620 Maple St

(City and Zip Code) Hillsboro, WI 54634

(Representing) Verona County

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/2000

BILL NO. _____

OR

SUBJECT Personal Care

care

(NAME) Marked Absent

141 Oak St. G.P.

(Street Address or Route Number)

(City and Zip Code) Verona WI 53593

(Representing) Verona HS D

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 02/02/2000

BILL NO. _____

OR

SUBJECT Personal Care

Reimbursement

(NAME) Macon Copper

243 E. Katherine Dr.

(Street Address or Route Number)

(City and Zip Code) La Farge, WI 54639

(Representing) Devon Co.

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. _____

OR

SUBJECT Personal Care

care

(NAME) Burton A Wagner

4834 Sherwood Rd

(Street Address or Route Number)

(City and Zip Code) Madison, WI 53711

(Representing) Courtesy Affected

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/1/00

BILL NO. _____

OR Saving

SUBJECT MA Personal Care

Tom Eggebrecht

(NAME)

2830 35TH ST,

(Street Address or Route Number)

Two Rivers, WI 54241

(City and Zip Code)

Brown County Human Services

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. _____

OR

SUBJECT SAVE PERSONAL

CARE

RICHARD L. LENZ

(NAME)

W732 S. H. 162

(Street Address or Route Number)

STODDARD

(City and Zip Code)

54658

VERNON CO. H.S.

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

When my parents met
father came he at home
from me go as he wants
and when he is ill
I at home now I am
good to mid a day
of work w/o the
personal strain

Thank you
Frank Miller

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/2000

BILL NO. SAVE Personal Care

SUBJECT _____

Rita Selin

(NAME) _____

W3240 City Rd B

(Street Address or Route Number) _____

West Salem WI 54989

(City and Zip Code) _____

Vernon County

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____

SUBJECT Save Personal

Care

Rory Himm

(NAME) _____

220 811 Rogers

(Street Address or Route Number) _____

Verona WI 53593

(City and Zip Code) _____

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____

SUBJECT Save

Personal

Care

(NAME) _____

Alice Dow

(Street Address or Route Number) _____

636 S. Washburn

(City and Zip Code) _____

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-80

BILL NO. _____

OR

SUBJECT Miss Hubbard

Call

Sandra Dorfold

(NAME)

811 Poplar

(Street Address or Route Number)

Wagoner 54665

(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-80

BILL NO. _____

OR

SUBJECT Miss Hubbard

Call

Bill Ford

(NAME)

811 Poplar

(Street Address or Route Number)

Wagoner 54665

(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-80

BILL NO. _____

OR

SUBJECT _____

John D Meyer

(NAME)

S 7501 Meyer Ave

(Street Address or Route Number)

Wagoner WI 54665

(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____
OR
SUBJECT Case Personal

Case

(NAME) Barney Platson

(Street Address or Route Number) 811 Maple

(City and Zip Code) Wausau 54605

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information
only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____
OR
SUBJECT _____

(NAME) Ruth Messer

(Street Address or Route Number) 57501 Messer Ave.

(City and Zip Code) Higgins WI 54408

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information
only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: Feb 2 - 2000

BILL NO. _____
OR
SUBJECT Case Personal

Case

(NAME) Cathi Omy

(Street Address or Route Number) Homestead #64

(City and Zip Code) Prairie du Chien, Wis 53821

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information
only; Neither for nor against:

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P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-82

BILL NO. _____
OR
SUBJECT Save Per Anual

care

(NAME) Don Smully

(Street Address or Route Number) 811 Cape Rd

(City and Zip Code) Wausau 54605

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: FEB 2, 2000

BILL NO. _____
OR
SUBJECT SAVE PERSONAL

CARE

(NAME) FRANCIS GENTER

(Street Address or Route Number) 1302 NORTHPERT DRIVE

(City and Zip Code) MADISON 53704

(Representing) DANE CO DEPT OF HUMAN SERVICES

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/2000

BILL NO. _____
OR
SUBJECT Save Personal Care

(NAME) Ann Stevens

(Street Address or Route Number) 15875 Rich Lake Rd

(City and Zip Code) Amnshburg WI 54902

(Representing) SENATE OF WISCONSIN

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/28/2000

BILL NO. _____
OR
SUBJECT Personal Care

Debra Wittenmayer
(NAME)
2614 Dundas St
(Street Address or Route Number)
St Jacob WI
(City and Zip Code) must to come
(Representing) (my family)

Speaking in Favor:
Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: P-02-06

BILL NO. P-02
OR
SUBJECT _____

W. Wilson
(NAME)
W. Wilson Rm 433
(Street Address or Route Number)
Madison, WI
(City and Zip Code)
Director of Dev. Disabilities
(Representing)

Speaking in Favor:
Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/00

BILL NO. _____
OR
SUBJECT Personal

Core Warrick
(NAME)
12425 Hwy 2
(Street Address or Route Number)
Proctorville WI 54982
(City and Zip Code)
Washers Co
(Representing)

Speaking in Favor:
Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____
OR
SUBJECT Sub Personal care

Susan A Johnson
(NAME)
1420 Sheridan Dr,
(Street Address or Route Number)
Madison, WI 53204
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 02/02/00

BILL NO. _____
OR
SUBJECT Save Personal Care

Heidi Koehler
(NAME)
7813 Van Buren St
(Street Address or Route Number)
Stoughton, WI 53589
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: Feb 2 2000

BILL NO. _____
OR
SUBJECT _____

Duane Johnson
(NAME)
(Street Address or Route Number)
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
P.O.Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____
OR _____

SUBJECT MA Personal Care

John Kriesow

Alan White

(NAME) 1 W. Wilson

(Street Address or Route Number)

(City and Zip Code)

(Representing) DHFS

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. Personal Care

SUBJECT _____

Practitioner Mother

(NAME) 5532 W. Webb St

(Street Address or Route Number)

(City and Zip Code) Madison WI 53707

(Representing) Independence First

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 02-02-00

BILL NO. _____
OR _____

SUBJECT Some Personal Care

Marlene Olson

(NAME) 201 Washington St.

(Street Address or Route Number)

(City and Zip Code) Westby, WI 54681

(Representing) Bethel Home + Services

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/00

BILL NO. _____

OR

SUBJECT Personal Care

(NAME) Shanahan

(Street Address or Route Number) 558 N. 63 rd St

(City and Zip Code) Mount Pleasant 53213

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____

OR

SUBJECT Personal Care

(NAME) Shanahan

(Street Address or Route Number) 33543 Nordale Ave

(City and Zip Code) Outaouais 5K6S1

(Representing) Be the Home & Source

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/2000

BILL NO. _____

OR

SUBJECT Save Personal Care

(NAME) John Donnelly

(Street Address or Route Number) 651 21. Main

(City and Zip Code) Madison 53703

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____

OR

SUBJECT Save Personal Care

Vernor Leudy

Barbara Zeimet

(NAME)

Stable Cemetery Rd

(Street Address or Route Number)

De Soto WI

(City and Zip Code)

(Representing) Vernor Leudy Humar Services

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/2000

BILL NO. _____

OR

SUBJECT SAVE PERSONAL

CARE

Bob Deist

(NAME)

4904 HAHN AVE

(Street Address or Route Number)

Madison 53710

(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____

OR

SUBJECT Save

Personal Care

Tom Welke

(NAME)

(Street Address or Route Number)

(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-80

BILL NO. _____

OR

SUBJECT True

Personal Care

Robert Deelben

(NAME)

3523 Wackerly

(Street Address or Route Number)

Waukegan WI 53105

(City and Zip Code)

All persons receiving

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-80

BILL NO. _____

OR

SUBJECT Save Personal

Care

Marvin McNeal

(NAME)

515 S. Rock

(Street Address or Route Number)

Waukegan WI 54665

(City and Zip Code)

Vernon Co. Snyk

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-80

BILL NO. _____

OR

SUBJECT Save Personnel

Care

Linda Nederlo

(NAME)

Box 823

(Street Address or Route Number)

Viroqua WI 54665

(City and Zip Code)

Vernon Co. Human Services

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. _____

OR

SUBJECT Save Personnel

Care

Ryanelle Major
(NAME)

413 N. State St.
(Street Address or Route Number)

kaFarage Wj. 54639
(City and Zip Code)

Derron County
(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: Feb. 2, 2000

BILL NO. _____

OR

SUBJECT Save Personnel

Care

Valerie Brown
(NAME)

612 E Dayton St Apt 1
(Street Address or Route Number)

Madison, WI 53705
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____

OR

SUBJECT Save Personnel

Care

Dolores Fortner
(NAME)

5211 Woods
(Street Address or Route Number)

Waukegan, 54165
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. _____
OR

SUBJECT MA Personal

NAME _____

Crystal Anne Nolan

(NAME)

Rt 2 R 213

(Street Address or Route Number)

Wheaton WI 54667

(City and Zip Code)

Verona Co

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. Save Personal Care

OR

SUBJECT _____

NAME _____

Clara Hartwig

(NAME)

253440 City Rd B

(Street Address or Route Number)

West Salem WI 54669

(City and Zip Code)

Verona County

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2-2000

BILL NO. Save Personal Care

OR

SUBJECT _____

NAME _____

Richard Selin

(NAME)

253440 City Rd B

(Street Address or Route Number)

West Salem WI 54669

(City and Zip Code)

Verona County

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-80

BILL NO. _____

OR

SUBJECT Cell Removal

Don Fish

(NAME)

200 E. Linton

(Street Address or Route Number)

Wroona 54665

(City and Zip Code)

Valton County

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: Feb. 2, 2000

BILL NO. _____

OR

SUBJECT _____

Theresa Sanders

(NAME)

Dine A. Human Services

(Street Address or Route Number)

1803 Northport Dr. Madison 53704

(City and Zip Code)

June County

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/3/2000

BILL NO. _____

OR

SUBJECT PER SOW & CARE

REIMBURSEMENT

(NAME)

Dou B. Cooper

(Street Address or Route Number)

2 LA FARRE, WI

(City and Zip Code)

COOPER FAMILY TREATMENT
Fac

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: Feb 2, 2000

BILL NO. _____

OR

SUBJECT Personal

Care Reimbursement

Deirdre Rodgers
(NAME)

3029 mtchesnae
(Street Address or Route Number)

Millwaun 53210
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 02/02/00

BILL NO. _____

OR

SUBJECT personal care

T.J. Pytko
(NAME)

1925 Schafer Rd
(Street Address or Route Number)

Schafer Rd 54426
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. _____

OR

SUBJECT Personal Care

Reimbursement

Lois Pitostke
(NAME)

8811 COLBY RD
(Street Address or Route Number)

MT HORSEB WI 53572
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____

OR

SUBJECT same

Personal Care

(NAME) Nancy D Schmidt

1333 North Ave

(Street Address or Route Number)

Union Grove, WI 53182

(City and Zip Code)

(Representing) all persons disabled

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-02-2000

BILL NO. _____

OR

SUBJECT Personal Care

Personal Care

(NAME) Therese Belski

Elkton County Rd NW

(Street Address or Route Number)

Brookview WI 54665

(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-02-00

BILL NO. _____

OR

SUBJECT Personal Care

Personal Care

(NAME) Maria Lopez

110 W. Beardsley Rd

(Street Address or Route Number)

For print WI 53212

(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/2000

BILL NO. _____

OR

SUBJECT Save Personal Care

Lili BARTES

(NAME)

1230 Sweeney Dr #6

(Street Address or Route Number)

Widoleton WI 53562

(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 02/02/00

BILL NO. Personal care

OR

SUBJECT Personal care

Michael Kusurik

(NAME)

7807 N. Lake Dr

(Street Address or Route Number)

Milwaukee, WI 53217

(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/14/00

BILL NO. Save Pe

OR

SUBJECT Save Personal Care

Michelle Mackinnon

(NAME)

1088 E. Geneva Ave, #201

(Street Address or Route Number)

Milwaukee, WI 53202

(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. _____

OR

SUBJECT See Personel

are

(NAME) Ann Plunkett

(Street Address or Route Number) 3320 W. Edmund Dr.

(City and Zip Code) Waukegan, WI 53150

(Representing) All persons with disability

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. _____

OR

SUBJECT State Care

are

(NAME) TeI Schuler

(Street Address or Route Number) 809 Kensington Rd

(City and Zip Code) Waukegan WI 54956

(Representing) Self

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. _____

OR

SUBJECT In favor of

Personal Care

(NAME) Greg Lueloff

(Street Address or Route Number) 1500 So 74 St

(City and Zip Code) Waukegan, WI 53214

(Representing) consumer

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. _____

OR

SUBJECT Saving

Personal Care

Mike O'Connor

(NAME)

1502 Williamson

(Street Address or Route Number)

Madison

(City and Zip Code)

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/00

BILL NO. _____

OR

SUBJECT Personal

Care Rehabilitation

Margaret M. Schmidt

(NAME)

4254 No. 42 St.

(Street Address or Route Number)

Milwaukee, WI 53209

(City and Zip Code)

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: Feb 2, 2000

BILL NO. _____

OR

SUBJECT Public Health -

Safe Personal Care

Debra Strub Powell

(NAME)

PR23

(Street Address or Route Number)

Westby WI 54667

(City and Zip Code)

(Representing) Retel Home + Services

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. SAE BOSSONIA CARE
OR

SUBJECT _____

Bob Hobbs

(NAME)

900 E. WAINE ST

(Street Address or Route Number)

THYBOURN 53529

(City and Zip Code)

THYBOURN OF WISCONSIN SA

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/00

BILL NO. _____
OR

SUBJECT SAE PERSONAL

CARE

LOU CONNOR

(NAME)

STEVENS POINT

(Street Address or Route Number)

(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____
OR

SUBJECT PERSONAL CARE

DAVID POAST

(NAME)

314 Garnet Ln.

(Street Address or Route Number)

MADISON WI 53714

(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. _____
OR _____

SUBJECT Saving Reward Care

Judy Cross

(NAME)

1802 Northport

(Street Address or Route Number)

Madison

(City and Zip Code)

WI 53704

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/00

BILL NO. _____
OR _____

SUBJECT Personal Care

Robin M-M. Sweet

(NAME)

32 Fourth St.

(Street Address or Route Number)

Belleville, 53508

(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/2000

BILL NO. _____
OR _____

SUBJECT PERSONAL

Care

(NAME)

Ted Pyle

(Street Address or Route Number)

(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. _____
OR

SUBJECT Personal Care

Tom M. Malenicz
(NAME)

410 Kedzie St. Upper
(Street Address or Route Number)

MA030N, WI, 53704-5014
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information
only; Neither for nor against:

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State Capitol - B35 South
P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. _____
OR

SUBJECT Personal Care

Jennifer Gesina
(NAME)

217 N. Thompson Dr. Apt 1
(Street Address or Route Number)

MA050N, WI, 53704
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information
only; Neither for nor against:

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State Capitol - B35 South
P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____
OR

SUBJECT Personal Care

Kelly Zolinski
(NAME)

813 Tompkins Dr.
(Street Address or Route Number)

Madison WI 53716
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information
only; Neither for nor against:

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State Capitol - B35 South
P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. _____

OR

SUBJECT Save

Personal Care

(NAME)

Senny Gault

(Street Address or Route Number)

1 N. Belknap 502

(City and Zip Code)

Madison 53703

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/2000

BILL NO. _____

OR

SUBJECT Save Personal

Care

(NAME)

Valerie Miller

(Street Address or Route Number)

309 Island Dr #5

(City and Zip Code)

Madison WI 53705

(Representing)

Local Map Inc / county community programs

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/2000

BILL NO. _____

OR

SUBJECT Personal Care

Yette OTeada

(NAME)

824 S. 13th St

(Street Address or Route Number)

(City and Zip Code)

WI 53204

(Representing)

Independence first

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/00

BILL NO. _____

OR

SUBJECT Personal Care

Mary Bohof
(NAME)
5320 W. Rose St.
(Street Address or Route Number)
Milwaukee, WI 53223
(City and Zip Code)
Independent Fmt
(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/2000

BILL NO. 0

OR

SUBJECT Personal Care

Jessica Remo-Etter
(NAME)
1606 Foshem Ave #210
(Street Address or Route Number)
Madison WI 53704
(City and Zip Code)
Citizen
(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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P.O. Box 7882
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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/00

BILL NO. _____

OR

SUBJECT Personal Care

Kata Czerper
(NAME)
1950 E. Washington #1
(Street Address or Route Number)
Madison WI 53704
(City and Zip Code)
Citizen
(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/00

BILL NO. _____
OR
SUBJECT Personal Care

Renee Alexander
(NAME)
3708 Harbor Rd.
(Street Address or Route Number)
Madison WI 53718
(City and Zip Code)
Atizon
(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information
only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/2000

BILL NO. 9
OR
SUBJECT Personal Care

Angela Nash
(NAME)
1441 Heath Ave
(Street Address or Route Number)
Madison, WI 53784
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information
only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____
OR
SUBJECT Personal Care

Karen Avery
(NAME)
2454 N. Sherman
(Street Address or Route Number)
Milwaukee 53210
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information
only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____
OR
SUBJECT Personal Care

(NAME) Tina Moreno

(Street Address or Route Number) 1257 Elm Lawn

(City and Zip Code) Douzatosa WI 53213

(Representing) Independence First

Speaking in Favor:

Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information
only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 02/02/00

BILL NO. _____
OR
SUBJECT Small Business Care

(NAME) Margaret Hubby M

(Street Address or Route Number) 345 E. Hiller Rd West

(City and Zip Code) Milwaukee 53212

(Representing) Independence First

Speaking in Favor:

Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information
only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2002

BILL NO. _____
OR
SUBJECT Small Personal Care

(NAME) Steve Nowicki

(Street Address or Route Number) 3215 W. Verona St

(City and Zip Code) Milwaukee 53215

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information
only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____
OR _____

SUBJECT SAVE PERSONAL

CARE

JADI HOSALE
(NAME)

11019 N. WATWATOSA RD.
(Street Address or Route Number)

MEQUON, WI. 53097
(City and Zip Code)

INDEPENDENCE FIRST
(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information
only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: February 2, 2000

BILL NO. _____
OR _____

SUBJECT SAVE PERSONAL CARE

AMALIA HESTER
(NAME)

544 S. TICKETWAY CT #P
(Street Address or Route Number)

GREENFIELD, WI. 53821
(City and Zip Code)

INDEPENDENCE FIRST
(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information
only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

~~BILL NO.~~ Save
OR _____

SUBJECT Personal

Care

Bruce Nielsen
(NAME)

4831 N. Beant/1st Ave
(Street Address or Route Number)

W. Fish Bay 53217
(City and Zip Code)

Myself
(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information
only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/00

BILL NO. Save Personal Care

OR

SUBJECT _____

Linda Smith
(NAME)
1509 Mandrake Rd
(Street Address or Route Number)

Madison 53704
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: Feb 7 - 2000

BILL NO. _____

OR

SUBJECT Personal Care

Marta Wentz
(NAME)
1817 - S Parker
(Street Address or Route Number)

Madison WI 53704
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____

OR

SUBJECT Save Personal Care

Pat Niemeyer
(NAME)
N 3296 Russian Cedar
(Street Address or Route Number)

Madison WI 53701
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____

OR

SUBJECT Personal Care

(NAME) Marie Jeyan

(Street Address or Route Number) 705 Dampier Rd.

(City and Zip Code) Wausau WI 53714

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/00

BILL NO. _____

OR

SUBJECT Personal Care

(NAME) Bill Brenden

(Street Address or Route Number) 212 So 11th

(City and Zip Code) La Crosse WI 54601

(Representing) American Sheep Healthcare

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____

OR

SUBJECT Personal Care

(NAME) Sen. Robert Mirsch

(Street Address or Route Number) 2nd Senate Dist.

(City and Zip Code) _____

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/00

BILL NO. _____
OR
SUBJECT save personal care

Debi Hanna, WCA
(NAME)
16 N Cavell St Ste 400
(Street Address or Route Number)
Madison 53703
(City and Zip Code)
WCA

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/2000

BILL NO. _____
OR
SUBJECT Personal Care

Deborah Kunz
(NAME)
2613 Balboa Ct #1
(Street Address or Route Number)
Madison WI 53713
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

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DATE: 2-2-00

BILL NO. _____
OR
SUBJECT Save Personal Care

David Grulke
(NAME)
1954 E Washburn #16
(Street Address or Route Number)
Madison, WI 53704
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____

OR

SUBJECT Personal care

FRED NAATZ

(NAME)

765 N. 2nd St.

(Street Address or Route Number)

PLAHEILLE WI 53818

(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____

OR

SUBJECT Save Personal care

Andrea Shulke

(NAME)

1954 E. Whashington #16

(Street Address or Route Number)

Madison, WI 53704

(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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P.O. Box 7882
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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/00

BILL NO. _____

OR

SUBJECT Save Personal care.

Shward

(NAME)

Menomonee St.

(Street Address or Route Number)

10615 N. Troy Ct

(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP
(Please Print Plainly)

DATE: 02/02/00

BILL NO. _____
OR _____

SUBJECT Personal Care

Inna Gokhman
(NAME)

11505 N. River Bay
(Street Address or Route Number)

Meguan WI 53882
(City and Zip Code)

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP
(Please Print Plainly)

DATE: 2-2-2000

BILL NO. _____
OR _____

SUBJECT Personal care

Dwayne Kohls
(NAME)

1001 Williams St Apt. 2
(Street Address or Route Number)

Madison WI 53703
(City and Zip Code)

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP
(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____
OR _____

SUBJECT Personal Care

Connie Peterson
(NAME)

314 Garnet Ln.
(Street Address or Route Number)

Madison, WI 53714
(City and Zip Code)

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. 630

OR

SUBJECT Save Kids - Audit

(NAME) Andrew Asselien

(Street Address or Route Number) 116 S. Fourth St.

(City and Zip Code) Watershed WI 53190

(Representing) Catholic Social Services

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/00

BILL NO. _____

OR

SUBJECT SAVE PERSONAL CARE

(NAME) Joe KAUFER

(Street Address or Route Number) 57 PT

(City and Zip Code) _____

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. _____

OR

SUBJECT Senior Personal Care

(NAME) Bruce A. Botten

(Street Address or Route Number) 150 South Street

(City and Zip Code) Sun Prairie WI

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. _____
OR

SUBJECT Save

Personal Care

Tom Nitcz

(NAME) PO Box 2457

(Street Address or Route Number)

Esale River, WI 53521
(City and Zip Code)

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor: _____

but not speaking:

Registering Against: _____

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. _____
OR

SUBJECT Saving

Personal Care

Joe Gavis

(NAME) 420 N Lower Level

(Street Address or Route Number)

Glendale WI 53209
(City and Zip Code) Funde Park

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor: _____

but not speaking:

Registering Against: _____

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____
OR

SUBJECT Personal Care

Martha White

(NAME) 252 E Commercial Ave

(Street Address or Route Number)

Love Park 53556
(City and Zip Code)

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor: _____

but not speaking:

Registering Against: _____

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/2000

BILL NO. _____

OR

SUBJECT See Personal Care

(NAME) John M. Mendenhall

(Street Address or Route Number) 301 HITTNS ST

(City and Zip Code) LITZS CHIE AT 54140

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

Registering Against:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/00

BILL NO. _____

OR

SUBJECT PAS increase

(NAME) Melinda Dentkney

(Street Address or Route Number) 1425 Green Bay

(City and Zip Code) Lacrosse WI 54601

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

Registering Against:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. _____

OR

SUBJECT Save

(NAME) Joanne Marks

(Street Address or Route Number) 1633 Hyde Avenue

(City and Zip Code) Lacrosse WI 54601

(Representing) Myself

Speaking in Favor:

Speaking Against:

Registering in Favor:

Registering Against:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/2/2000

BILL NO. _____

OR

SUBJECT Sen Personal Care

Dennis Stefonek

(NAME)

9007 Bittersweet rd

(Street Address or Route Number)

Wausau, WI 54401
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
P.O. Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 3/2/2000

BILL NO. _____

OR

SUBJECT Sen Personal Care

Tommy Lubanasium

(NAME)

2625 Helen Street

(Street Address or Route Number)

Stevens Point, WI 54481
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. _____

OR

SUBJECT Sen Personal Care

Amylewis

(NAME)

1020 S. 10th

(Street Address or Route Number)

LaCrosse, WI 54601
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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State Capitol - B35 South
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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/2000

BILL NO. _____
OR _____
SUBJECT See Personal Case

(NAME) Pat HANCOCK
(Street Address or Route Number) _____
W7135 CT A F
(City and Zip Code) _____
(Representing) _____

Speaking in Favor:
Speaking Against:
Registering in Favor:
but not speaking:
Registering Against:
but not speaking:
Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. _____
OR _____
SUBJECT Saving Personal Case

(NAME) Helvie Lenz
(Street Address or Route Number) Waldgrave St
Dunbar, WI 54650
(City and Zip Code) _____
(Representing) _____

Speaking in Favor:
Speaking Against:
Registering in Favor:
but not speaking:
Registering Against:
but not speaking:
Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. _____
OR _____
SUBJECT Saving Personal Case

(NAME) Rhonda Staats
(Street Address or Route Number) 1430 Market St
La Crosse, WI 54601
(City and Zip Code) _____
(Representing) _____

Speaking in Favor:
Speaking Against:
Registering in Favor:
but not speaking:
Registering Against:
but not speaking:
Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/2000

BILL NO. _____

OR

SUBJECT SAVE PERSONAL CARE

Nicky Lindman

(NAME) _____

223 Third Ave E

(Street Address or Route Number) _____

Ashland WI 54806

(City and Zip Code) _____

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor: _____

but not speaking:

Registering Against: _____

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. 5482

OR

SUBJECT Personal Care

Joe Janner

(NAME) _____

(Street Address or Route Number) _____

(City and Zip Code) _____

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor: _____

but not speaking:

Registering Against: _____

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. _____

OR

SUBJECT Save Personal Care

LISA Christopherson

(NAME) _____

5144 Gordon Ave

(Street Address or Route Number) _____

SPARTA WI 54650

(City and Zip Code) _____

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor: _____

but not speaking:

Registering Against: _____

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2003

BILL NO. _____

OR

SUBJECT Saving Personal Care

Hadon W. Knack

(NAME)

1014 Shackberry Lane

(Street Address or Route Number)

Madison WI. 53713

(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/2003

BILL NO. _____

OR

SUBJECT Save Personal Care

Topic To Amend

(NAME)

1014 Shackberry Lane

(Street Address or Route Number)

Madison WI 53713

(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/00

BILL NO. _____

OR

SUBJECT save personal care

Heim Leager

(NAME)

W5856 Cedar Ct.

(Street Address or Route Number)

Stollend, WI 54658

(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-80

BILL NO. _____
OR
SUBJECT Personal Care

Shawn Corbin

(NAME) 1128 Hopkins Ave

(Street Address or Route Number) Superior, WI 54880

(City and Zip Code) North Country Independent Living

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor: _____

but not speaking:

Registering Against: _____

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-80

BILL NO. _____
OR
SUBJECT Personal Care

CAAC

(NAME) MARK NOVOTNY

(Street Address or Route Number) 11421 Halbergs Rd

(City and Zip Code) DESMOIS, WI 54459

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor: _____

but not speaking:

Registering Against: _____

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/80

BILL NO. _____
OR
SUBJECT Personal Care

Ards

(NAME) Mar Bredel

(Street Address or Route Number) 516 Va. Avenue

(City and Zip Code) Madison 53705

(Representing) WI Cooper for Advocacy

Speaking in Favor:

Speaking Against:

Registering in Favor: of Sewing PC

but not speaking:

Registering Against: _____

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/2000

BILL NO. _____

OR

SUBJECT Save Personnel Care

Charlotte Rogers

(NAME) 2521 N 57e

(Street Address or Route Number)

Milled 53210

(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. _____

OR

SUBJECT Saving Personnel Care

Steve Remmen

(NAME) 1817 Spohn

(Street Address or Route Number)

Madison WI 53707

(City and Zip Code)

(Representing) Self Accepts Ombudsman

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-02-00

BILL NO. _____

OR

SUBJECT Save Personal Care

Elizabeth A. Johnson

(NAME) 310 So Carter

(Street Address or Route Number)

Madison WI 53705

(City and Zip Code)

(Representing) Womens & Children Dept

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. _____

OR

SUBJECT Saving Personal

Case

(NAME) Karla Smith

(Street Address or Route Number) 1440 College Street, Danville

(City and Zip Code) Danville WI 53514

(Representing) Self | Access to Independence

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/2000

BILL NO. _____

OR

SUBJECT Save Personal Case

(NAME) Thayer Taylor

(Street Address or Route Number) 1

(City and Zip Code) Kenilworth 53072

(Representing) _____

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/2000

BILL NO. _____

OR

SUBJECT MA / Personal

Case

(NAME) Dale Thompson

(Street Address or Route Number) 8080f 1867

(City and Zip Code) Danville WI 53514

(Representing) Pro-life center

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. _____

OR

SUBJECT Save

Personal Care

Hail Chamberlain

(NAME)

N3995 Annex Rd

(Street Address or Route Number)

Jefferson, WI 53549

(City and Zip Code)

Jefferson County PCW Program

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information

only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-Jul-2000

BILL NO. _____

OR

SUBJECT M.A.

Personal Care

Lt Ann Lang

(NAME)

111 Genov St

(Street Address or Route Number)

Greenfield, WI

(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information

only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/2000

BILL NO. 1030

OR

SUBJECT against

14th credits

Bob Decker

(NAME)

Madison

(Street Address or Route Number)

53716

(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information

only; Neither for nor against:

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P.O.Box 7882
Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/1/2000

BILL NO. N/A

OR

SUBJECT ~~AA~~ quality

asansst them

Drew M. Cusker

(NAME)

13th. Gr Street

(Street Address or Route Number)

MADISON 53704

(City and Zip Code)

Community Living Alliance
(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____

OR

SUBJECT the railroad

call

Bob Hall

(NAME)

811 Maple

(Street Address of Route Number)

Wadena 54665

(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. _____

OR

SUBJECT Save Personal

Leads

Mary Reed

(NAME)

1221 South St

(Street Address or Route Number)

PAWAPE DR Chiew 53884

(City and Zip Code)

Personal Leads WCAP
(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/00

BILL NO. _____
OR
SUBJECT Save Personal Care

Christie Poole

(NAME)
4110 W. ELEVANTH AVE.
(Street Address or Route Number)

OSH KOSH WI 54902
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-00

BILL NO. _____
OR
SUBJECT Save Personal Care

(NAME)
Kathleen Costery

(Street Address or Route Number)

2239 Woodland Dr
(City and Zip Code) Madison WI 53703

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-03-00

BILL NO. _____
OR
SUBJECT Personal Care

Star Spence

(NAME)
4269 W. Highlnd Blvd
(Street Address or Route Number)

Milwaukee WI 53212
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:
but not speaking:

Registering Against:
but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-2000

BILL NO. _____
OR

SUBJECT Save

Personal Care

Laura Mae Jackson
(NAME)

910 S. Beethoven
(Street Address or Route Number)

Prosser's Dr. Pleasant, WI
(City and Zip Code)

Miss Dove, Sherris Alexander
(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2/2/2000

BILL NO. _____
OR

SUBJECT Save Personal Care

Tason Turcott
(NAME)

S Sayer Ct. #94
(Street Address or Route Number)

Madison, WI, 53717
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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Madison, WI 53707-7882

SENATE HEARING SLIP

(Please Print Plainly)

DATE: FEB. 2, 2000

BILL NO. _____
OR

SUBJECT Personal Care

SARINA NOSTLEY
(NAME)

983 NOORLAND RD.
(Street Address or Route Number)

MADISON, WI 53713
(City and Zip Code)

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information only; Neither for nor against:

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SENATE HEARING SLIP

(Please Print Plainly)

DATE: 2-2-88

BILL NO. _____

OR

SUBJECT Personal Care

Please Personal Care!

Ellen Fahrenholt

(NAME) 33 S. Medvale Blvd

(Street Address or Route Number)

Madison, WI 53705

(City and Zip Code)

A A R P State Spicatory Comm.

(Representing)

Speaking in Favor:

Speaking Against:

Registering in Favor:

but not speaking:

Registering Against:

but not speaking:

Speaking for information

only; Neither for nor against:

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