## SENATE COMMERCE COMMITTEE

DATE: 2/10/22

NAME Ray Cantor

ORGANIZATION REPRESENTED (if any) NJBIA

E-MAIL (OPTIONAL)

ADDRESS (OPTIONAL)

TELEPHONE (OPTIONAL)

WISH TO SPEAK ON BILL NUMBER S901

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR ☐ OPPOSED ☐

Speaker will be accorded an opportunity to testify at the Chair's discretion. NO NEED TO TESTIFY ☐

Please give this completed form to the Committee aide prior to the start of the meeting along with copies of any prepared statement.

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

## SENATE COMMERCE COMMITTEE

DATE: 2/10/2022

NAME Beverly Brown Ruggia

ORGANIZATION REPRESENTED (if any) New Jersey Citizen Action

E-MAIL (OPTIONAL) Beverly@njcitizenaction.org

ADDRESS (OPTIONAL) [redacted]

TELEPHONE (OPTIONAL)

WISH TO SPEAK ON BILL NUMBER S901

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR ☐ OPPOSED ☐

Speaker will be accorded an opportunity to testify at the Chair's discretion. NO NEED TO TESTIFY ☐

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SENATE COMMERCE COMMITTEE

DATE: _____

NAME Kathleen Reilly

ORGANIZATION REPRESENTED *(if any)* New Jersey Association for Justice

E-MAIL *(OPTIONAL)* _____

ADDRESS *(OPTIONAL)* _____

TELEPHONE *(OPTIONAL)* _____

WISH TO SPEAK ON BILL NUMBER S-901

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR X OPPOSED _____

Speaker will be accorded an opportunity to testify at the Chairman's discretion. NO NEED TO TESTIFY _____

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SENATE COMMERCE COMMITTEE

DATE: _____

NAME Stephen DeNittis

ORGANIZATION REPRESENTED *(if any)* NJ Association for Justice

E-MAIL *(OPTIONAL)* _____

ADDRESS *(OPTIONAL)* _____

TELEPHONE *(OPTIONAL)* _____

WISH TO SPEAK ON BILL NUMBER S-901

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR X OPPOSED _____

Speaker will be accorded an opportunity to testify at the Chairman's discretion. NO NEED TO TESTIFY _____

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## SENATE COMMERCE COMMITTEE

DATE: 2/10/2022

NAME Sam Worthy

ORGANIZATION REPRESENTED (if any) DIVISION OF CONSUMER AFFAIRS

E-MAIL (OPTIONAL)

ADDRESS (OPTIONAL)

TELEPHONE (OPTIONAL)

WISH TO SPEAK ON BILL NUMBER 901

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR ☒ OPPOSED ☐

Speaker will be accorded an opportunity to testify at the Chair's discretion. NO NEED TO TESTIFY ☐

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## SENATE COMMERCE COMMITTEE

DATE:

NAME Steve Fokas

ORGANIZATION REPRESENTED (if any)

E-MAIL (OPTIONAL)

ADDRESS (OPTIONAL)

TELEPHONE (OPTIONAL)

WISH TO SPEAK ON BILL NUMBER S901

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR ☑ OPPOSED ☐

Speaker will be accorded an opportunity to testify at the Chair's discretion. NO NEED TO TESTIFY ☐

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SENATE COMMERCE COMMITTEE

DATE: 2/10/22

NAME David McMillin

ORGANIZATION REPRESENTED (if any) Legal Services of New Jersey

E-MAIL (OPTIONAL) dmcmillin@lsnj.org

ADDRESS (OPTIONAL) [redacted]

TELEPHONE (OPTIONAL) [redacted]

WISH TO SPEAK ON BILL NUMBER S401

PLEASE SUBMIT ONLY ONE BILL NUMBER PER SLIP

IN FAVOR ☒ OPPOSED ☐

Speaker will be accorded an opportunity to testify at the Chair's discretion. NO NEED TO TESTIFY ☒

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