Oregon Department of Environmental Quality: COMMENT REGISTRATION FORM



NAME: Chris M. Gannon]
REPRESENTING: CHOKED River Watershed Council	
ADDRESS: 498 SE Lynn Blud.	
CITY: Prinerile STATE: OR ZIP CODE: 9772	54
I request approximately 5 minutes to address the subject of Fish Consumption Red	5-
WO Stds.	

Check here if you wish to be added to the mailing list about this subject. Be sure your complete mailing address is listed above.

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Oregon Department of Environmental Quality COMMENT REGISTRATION FORM

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DEQ

Bo	= V	DEQ
NAME: Derky BRYMME		
REPRESENTING: C: Ty of		
ADDRESS: 387 NE 3Rd	57,	
CITY: PRINE USITE	STATE: OKE	ZIP CODE: <u>97754</u>
I request approximately <u>/O</u> minutes to	address the subject of _	New Rule
changes		

Check here if you wish to be added to the mailing list about this subject. Be sure your complete mailing address is listed above.

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Oregon Department of Environmental Quality: COMMENT REGISTRATION FORM



COMMITTEE OF THE CAMERA CONTRACTOR OF THE CONTRACTO
NAME: BRUCE J.M
REPRESENTING: WARM Springs Tribe Columbia River Intentribal
ADDRESS: Q.U.Box 571
CITY: WARM Spring STATE: Ore ZIP CODE: 97761
I request approximately 5 minutes to address the subject of Sacramental subject of Sacramen
Statement

Check here if you wish to be added to the mailing list about this subject. Be sure your complete mailing address is listed above.

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Oregon Department of Environmental Quality COMMENT DECISTDATION FODM



NAME: WWW ANG REPRESENTING: ADDRESS: 15263 SE WAYSAW RD	
ADDRESS: US 263 SE WAYSAL RD	
ADDRESS: 15263 SE WAKSAL RD	
D. 1115	
CITY: Pringville STATE: OR ZIP CODE: 9775	4
I request approximately minutes to address the subject of	
Check here if you wish to be added to the mailing list about this subject. Be sure you	ır
complete mailing address is listed above. DEQ\WQ\PPPD\WC15\WC15620.doc (4)	1/00)

* DID NOT TESTIFY*

Oregon Department of Environmental Quality: COMMENT REGISTRATION FORM



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NAME: Wake Flegel	DEQ
REPRESENTING: Land ownz	
ADDRESS: 9271 NW Ma Caba	wijflegel @ web formixa, r.com
CITY: Prineville	STATE: 0 ZIP CODE: 97754
I request approximately minutes to	address the subject of
Please provede c	opy of Hearing Report
Check here if you wish to be added to complete mailing address is listed about	o the mailing list about this subject. Be sure your ove.

* DID NOT TESTIFYX

Oregon Department of Environmental Quality

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DEQ	

COMMENT REGISTRATION FORM
NAME: NE KASBONIAN
REPRESENTING: OCHOCO IMIGATION DIST
ADDRESS: 1001 NW DTM ST
CITY: PHURUILLO STATE: OR ZIP CODE: 97751
I request approximately minutes to address the subject of
PLEASE SEND A CORY OF WHITEN HEAPING REPERT
Check here if you wish to be added to the mailing list about this subject. Be sure your complete mailing address is listed above.  DEQ\WQ\PPPD\WC15\WC15620.doc (4/00)