WILLIAM M, MAGILL, Clerk
Mellssa Kucserik,
First Assistant Clerk
Rebecca Silbernagel,
Second Assistant Clerk
Jeremy Welss,
Journal Clerk
Dierdre Allen
Resolution Clerk
Chris Ditmeyer,



House of Representatives
State House
Montpelier, VT05633-5501
Tel: (802) 828-2247
e-mail: holerk@leg.state.vt.us

VERMONT HOUSE OF REPRESENTATIVES OFFICE OF THE CLERK

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N:				
144	ame. VIII 9 - 3 CC / 2	 		
Is	serve on, or am a member of, the following	Boards, Co	mmissions, or	Entities
re	gulated by law or that receive funding fron	the State:		
	Remuneration			
	Board, Entity, or Commission Name,	No	Yes-	Yes
	and Position (e.g. Board Member,	110	Only	103
	Board Chair)		Expenses	
	Board Chair)		e.g.	
			mileage	
Z	Epard Member, Peoples			
He	eath + Wellness Clinic	$\perp \chi$		
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M	y Employer:			
(S	alary disclosure not required)			
G!	gned this 10 day of fantaly, 20	10		
31	gned this 10 day of 11 manual conf. 20.	19		
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Pr	inted Name, please sign on back			