**BUSINESS REPORT**

**MONTANA SENATE**
**61st LEGISLATURE - REGULAR SESSION**

**SENATE JOINT SELECT COMMITTEE ON REAPPRAISAL COMMITTEE**

**Date:** Tuesday, March 17, 2009 **Time:** 5:15 pm
**Place:** Capitol **Room:** 335

**BILLS and RESOLUTIONS HEARD:**
Prefix (HB, HR, HJR, SB, SR, or SJR) and number. Add Postponed (PP) when appropriate:

**EXECUTIVE ACTION TAKEN:**
Prefix (HB, HR, HJR, SB, SR, or SJR) and number. Enter P(pass) F(failed) DPAA (do pass as amended) BC(be concurred in) BCAA (be concurred in as amended):

**COMMENTS:**

Kelly Gebhardt
SEN. Kelly Gebhardt, Chairman

# MONTANA STATE SENATE
## Roll Call
## JOINT SELECT COMMITTEE ON REAPPRAISAL

DATE: 3-17-09

| NAME | PRESENT | ABSENT/ EXCUSED |
|---|---|---|
| SENATOR KELLY GEBHARDT, CHAIR | ✓ | |
| SENATOR BRUCE TUTVEDT | ✓ | |
| SENATOR KIM GILLAN | ✓ | |
| SENATOR CHRISTINE KAUFMANN | ✓ | |
| REPRESENTATIVE WAYNE STAHL | ✓ | |
| REPRESENTATIVE BRIAN HOVEN | ✓ | |
| REPRESENTATIVE MIKE JOPEK | ✓ | |
| REPRESENTATIVE JP POMNICHOWSKI | | ✓ |
| | | |
| SENATOR ROBERT STORY JR. | | |
| SENATOR JEFF ESSMANN also present | ✓ | |
| REPRESENTATIVE BOB LAKE | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

**MONTANA STATE SENATE**
**Visitors Register**

**Finance and Claims Committee** **Date** 3-18-2009

**Bill No.** HB 71 **Sponsor(s)** Representative Sands

**PLEASE PRINT** **PLEASE PRINT** **PLEASE PRINT**

| Name and Address | Representing | Support | Oppose | Inf. |
|---|---|---|---|---|
| Jane Hammon | Self | X | | |
| Frank Cote | BCBSMT | X | | |
| [illegible] | [illegible] | X | | |
| Mike Foster | WMH + Catholic hosps | X | | |
| Bob Olsen | MT Hospital Assn | X | | |
| Mona Jamison | SHODAIR | X | | |
| Amee Lamoliez | Billings Clinic | X | | |
| Ryan Tooke | Rosebud Health Care Center | | | |
| Amy Astin | Benefis Health System | X | | |
| [illegible] | [illegible] | | | |
| Erin MacLean | MT Medical Assoc. | X | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

**Please leave prepared testimony with Secretary. Witness Statement forms are available if you care to submit written testimony.**

# MONTANA STATE SENATE
## Visitors Register

Finance and Claims Committee Date 3-18-2009

Bill No. SB 505 Sponsor(s) Senator Bales

**PLEASE PRINT PLEASE PRINT PLEASE PRINT**

| Name and Address | Representing | Support | Oppose | Inf. |
|---|---|---|---|---|
| [illegible] Bozeman Mt | TRWUA | | ✓ | |
| John Hamilton | TRWUA | | ✓ | |
| Mike Murphy | MWRA | X | | |
| John Youngberg | MFBF | X | | |
| [illegible] | [illegible] | | ✓ | |
| Bob Keeding Bozeman | Northern Plains | | X | |
| Julia Page | Northern Plains | | X | |
| Todd O'Hair | Rio Tinto Energy | X | | |
| [illegible] | WETA | X | | |
| Paul Abercrombie | MT Petroleum Assn | X | | |
| Gail Abercrombie | Montanans for Responsible Energy Development | X | | |
| John Tubbs | MT DNRC | | | X |
| Brianna Randall | CF Coalition | | X | |
| Tom Richmond | MT Board of Oil & | | | X |
| Kyla Wiens | MEIC | | X | |
| Dave McRae | SELF | | X | |
| Clint McRae | SELF | | X | |
| Jay Bodner | MSGA | X | | |
| | | | | |

**Please leave prepared testimony with Secretary. Witness Statement forms are available if you care to submit written testimony.**

MONTANA STATE SENATE
Visitors Register

Finance and Claims Committee Date 3-18-2009

Bill No. HB 104 Sponsor(s) Representative French

PLEASE PRINT PLEASE PRINT PLEASE PRINT

| Name and Address | Representing | Support | Oppose | Inf. |
|---|---|---|---|---|
| John E Walsh | DMA | 4 | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Please leave prepared testimony with Secretary. Witness Statement forms are available if you care to submit written testimony.

# MONTANA STATE SENATE
## Visitors Register

**Finance and Claims Committee** **Date** 3-18-2009

**Bill No.** HB 97 **Sponsor(s)** Representative Boland

**PLEASE PRINT PLEASE PRINT PLEASE PRINT**

| Name and Address | Representing | Support | Oppose | Inf. |
|---|---|---|---|---|
| PAT McNAMEE | DEPT OF ADMIN | ✓ | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

**Please leave prepared testimony with Secretary. Witness Statement forms are available if you care to submit written testimony.**