To sign in for bill that is being heard in a committee meeting, you will need a few pieces of information; chamber of committee (House or Senate), committee name (e.g., Health & Long Term Care, Appropriations, Health Care & Wellness, Ways & Means), meeting date and time, and bill number.

Once you have this information, visit this website - https://app.leg.wa.gov/csi

Once there you will see several options.

Committee Sign In

Please select which chamber or agency you would like to submit testimony for:



Select the chamber of the committee and you will then be prompted to select the committee and the specific meeting where the bill is being heard. Below I have selected the House Health Care & Wellness Committee.

House Committee Sign In

Return to Committee Sign In Home

Committee:	Select 🗸	Meetings:	Select a Committee 💙	
Instructions	Select Agriculture and Natural Resources	Instructions		
Instructions	Appropriations Capital Budget	profile: <u>Instructions</u>		
How to Regis	Civil Rights & Judiciary Community Safety, Justice, & Reentry			
1. Select tł	Consumer Protection & Business	for which you would like to testify.		
2. Testimo	Education	neeting. Anyone who does not regist		
3. To testi	Environment & Energy	he hearing." Ensure your registration		
make ch	Finance Health Care & Wellness	TVW for online and television graphi		
1. Ne	Housing	ically be sent a Zoom link for the me		
us	Human Services, Youth, & Early Learning			
4. To testi	Innovation, Community & Economic Development, & Veterans	your registrat	ion information is accu	
be a par	Labor & Workplace Standards	levision graphics.		
Additional In	Local Government Postsecondary Education & Workforce			
Registra	Regulated Substances & Gaming	tration closes	one hour before the m	
registrat	State Government & Tribal Relations Transportation	can easily fin	d it on the day of the h	

And I will then select the 02/15/23 1:30 PM meeting.

House Committee Sign In

Return to Committee Sign In Home

Committee:	Health Care & Wellness 🗸 🗸	Meetings:	Select	~
You have er If the error o	icountered an unexpected error. Please try again. if continues, please notify the Legislative Information Center at	: <u>support@le</u>	Select 02/10/23 8:00 AM 02/14/23 1:30 PM 02/15/23 1:30 PM	

This brings up the agenda for the meeting.

House Committee Sign In

Return to Committee Sign In Home

Committee:	Health Care & Wellness	~	Meetings:	02/15/23 1:30 PM	~
Select agenda item					
O HB 1713 F	lealth care/rural areas				

Select the bill that you would like to sing in for, in this case I did HB 1713 Health care/rural areas.

This gives you several options.

House Committee Sign In

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Return to Committee Sign In Home

Committee: Health Care & Wellness	~	Meetings:	02/15/23 1:30 PM	~	
Select agenda item					
HB 1713 Health care/rural areas					
Select type of testimony					
I would like to testify in person during the hearing					
I would like to testify remotely					
I would like my position noted for the legislative record					
I would like to submit written testimony					
See who has signed in for this agenda item					

You can choose which option works best for you. For these instructions we are going to select "I would like my position noted for the legislative record"

You will then need to complete the form including your information, the first box is where you will sign in as "Pro", "Con", or "Other".

Committee Sign In - Legislative Record

Complete the fields below and press submit to state your position on a bill without testifying.

Committee: Health Care & Wellness Date/Time: 2/15/2023 1:30:00 PM Bill/Issue: HB 1713 Health care/rural areas Location: House Hearing Rm A and Virtual

Required fields are marked with an asterisk (*).

This system is used as a roster to show who has registered and wishes to state their position on a bill. The information you provide will be made available to legislative committee members and staff of the committee, and will be included in the legislative record for bill and meeting archival purposes. Please ensure your information is accurate.

The roster is a legislative record maintained under chapter 40.14 RCW (Preservation and Destruction of Public Records) and subject to public disclosure under chapter 42.56 RCW (Public Records Act).

*Position:

Please Select		~	
Please Select			
Pro			
Con			
Other			
*Last Name:			
*Email:			
Use only your own er	nail address		
Organization:			
If you are testifying a	s an official representative on	behalf of a particular organ	ization, please specify:
Address:			

After hitting "Submit Registration" at the bottom of the page, your stance on the issue will be recorded.