WITNESS REGISTRATION

Committee Name: HREV	
Jublic Hearing on: HB 3447	Date: $3/15/2011$
Please register if you wish to testify on the above named measure/issue.	Please print legibly.

Name and Organization <u>or</u> County of Residence	Phone # (Optional)				Are you submitting written testimony?			
PLEASE PRINT LEGIBLY	(optional)	Yes	No	For	Against	Neutral	Yes	No
Jody Wic								
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Committee Services

Revised 04/04

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Committee Services

Revised 04/04

	Name and Organization <u>or</u> County of Residence	Phone # (Optional)	Do you live more than 100 miles from this meeting location?		Position			Are you submitting written testimony?	
	PLEASE PRINT LEGIBLY	(Optional)	Yes	No	For	Against	Neutral	Yes	No
1	Jody Wic								