WITNESS REGISTRATION

Please register if you wish to testify on the above named mea	sure/issue. <i>Please print legibly.</i>
Public Hearing on: $SB 8/7$	Date: <u>4-/-13</u>
Committee Name: SEN. FINANCE	+ REVENUE

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