blic Hearing on: $38/12$								
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?	
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Committee Services

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Committee Name: <u>//</u> .	Energy_	K ENVKIN	ment	
Public Hearing on: 5B	337	Date:	4/23/13	

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 PLEASE PRINT LEGIBLY	Phone # (Optional)	Do you live more than 100 miles from this meeting location?		Position			Are you submitting written testimony?	
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Please register if you wish to testify on the above named measure/issue. **Please print legibly.** 

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