MEASURE: HB 2297 EXHIBIT: 20 HOUSE HEALTH CARE DATE: 2/4/15 PAGES: SUBMITTED BY: Staff

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## WITNESS REGISTRATION

Committee Name: House Committee on Health Care						
Public Hearing on: HB 22	lic Hearing on: HB 2297		Date: $02/04/2015$			
Please register if you wish to testify on the above-named measure/issue. <u>Please print legibly</u> .						
Name Organization or County of Residence  PRINT LEGIBLY		Check if you live more than 100 miles from	Position on Measure			
		this meeting.	For	Against	Neutral	
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