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## WITNESS REGISTRATION

| Please register if you | u wish to testify on the | e above-named | measure/issue. | Please pr | int legibly. |  |
|------------------------|--------------------------|---------------|----------------|-----------|--------------|--|
| Public Hearing on:     | HB 2445                  |               |                | Date: 02- | 10-2015      |  |
| Committee Name: _      | House Committee          | on Rural C    | ommunities,    | Land Use  | and Water    |  |

| Name  PRINT LEGIBLY | Organization or County of Residence | Check if you live more than 100 miles from this meeting. | Position on Measure |         |         |
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