PUBLIC RECORD: This form, your verbal testimony, and materials you distribute will be posted on the Internet and accessible to the public.

## WITNESS REGISTRATION

Committee Name: _	House	2 Rules			
Public Hearing on:	HCR	20		Date:_	4-6-2015
Please register if you wish to testify on the above-named measure/issue. Please print legibly.					

Name  PRINT LEGIBLY	Organization or County of Residence	Check if you live more than 100 miles from this meeting.	Position on Measure		
			For	Against	Neutral
				1	
				1	
	*				
		-			