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:	e Zducetion			
Public Hearing on:	53	Date:	4/14/2015	
Please register if you wish to testify	on the above-named measure/issu	e. <u>Please</u>	print legibly.	
Name	Name Organization or County of Residence PRINT LEGIBLY	Check if you live more than 100 miles from this meeting.	Position on Measure	
PRINT LEGIBLY			For Against Nautra	

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			For	Against	Neutral
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