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WITNESS REGISTRATION

Committee Name:	_House	Homan	Services	4	Housing				
Public Hearing on:	HB	3524			Date:	4/17/15			
Please register if you wish to testify on the above-named measure/issue. <u>Please print legibly</u> .									

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