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## WITNESS REGISTRATION

Committee Name: SENF	HE VETER	ans 3 emer	2GENCY	PRI	EPAR	2EDV
Committee Name: SENA  Public Hearing on:	SB 86	9	Date:	4/2	1/20	15
Please register if you wish to	testify on the abo	ve-named measure/issu	ie. <i>Please</i>	<u>print</u>	<u>legibl</u>	<u>v</u> .
Name  PRINT LEGIBLY	Organi	zation or County of Residence	Check if you live more than 100 miles from this meeting.	Position on Measure		
				For	Against	Neutral
				-		