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: _	Howe?	ndiciary			2	
Public Hearing on:	SB 367A	I	_ Date:_	Y	23/15	
Please register if you	u wish to testify	on the above-named measure/issue.	Pleas	e pi	rint legibly.	

Name PRINT LEGIBLY	Organization or County of Residence	Check if you live more than 100 miles from this meeting.	Position on Measure		
		and meeting.	For	Against	Neutral
Kelly Harpsken	Law Soction Condo working group CAI-LAC OWCAM		X		
Kelly Harpskin	CAI-LAC OWCAN		X		
	_				