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WITNESS REGISTRATION

Committee Name: House	Rules		
Public Hearing on: SR 9		Date:	5-13 <i>-2</i> 015
Please register if you wish to testify	on the above-named measure/issu	e. <i>Please</i>	print legibly.
Name	Organization or County of Residence	Check if you live more than 100	Position on Measure

PRINT LEGIBLY	Residence	live more than 100 miles from this meeting.			
			For	Against	Neutral
es)					:
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