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	WITNESS REGIST	RATION
Committee Name:	Senate Rules	
Public Hearing on: _	S.E. 91%	Date: 701%

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		
		tins meeting.	For	Against	Neutral
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