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:	House	Rules		
Public Hearing on:	HCR	29	_ Date:_	5-27-2015
Please register if you	ı wish to test	ify on the above-named measure/issue	. Please	e print legibly.

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