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	WITNESS REGISTRATION	
Committee Name:		
Public Hearing on:	HB 2127A	Date: 5/5/15
Please register if you	wish to testify on the above-named measure/issue.	Please 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	
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		WIINESS REGISTRA	IIION	
Committee Name: _				
Public Hearing on:	HB	2127/4	Date: 5/5//5	
Please register if yo	ou wish to testi	fy on the above-named measi	ure/issue. Please print legibly.	

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