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## WITNESS REGISTRATION

| Committee Name:  | JW. | MCC  |        |           |  |  |
|--|-----|------|--------|-----------|--|--|
| Public Hearing on: _   | SB  | 5508 | Date:_ | 2-23-2017 |  |  |
| 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<br>live more<br>than 100<br>miles from<br>this meeting. | Position on Measure |         |         |
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