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WITNESS REGISTRATION

Committee Name: Senote Education				
Public Hearing on: SB 595	_ Date:_	2/	23	117
Please register if you wish to testify on the above-named measure/issue.	Please	e pri	nt leg	<i>ibly</i> .

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
MIKE SWLLVAN	AW PPD		X		
Chris Vogel	2WVOR			X	
MARCIA Kelley	AWARD LWVOR OWRC		l	K	
J					
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