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## WITNESS REGISTRATION

Committee Name: _	Senate	Houlth Care	
Public Hearing on:	SB 419		Date: 3/14/17
Please register if you	u 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
Jared Mason-Gere	OEA		X		
Felisa Hagins	SE IU		X		
Paul McKenna	SEIU		X		
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