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## WITNESS REGISTRATION

Committee Name:	Services 4 Ho	using			
Public Hearing on:	2210	Date:	3/2	3/17	7
Please register if you wish to testify	on the above-named measure/issu	ie. <u>Please</u>	print	legibl	<u>v</u> .
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