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## WITNESS REGISTRATION

Committee Name:	Senate Health Care		
Public Hearing on:	5B 784	Date:	3/23/17
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
Terri Myzak /	Marion		X		
Terri Myzak / Donna Wolfe/ EUSE BUTH /	Marion AttiP		X		
EUSE BUTH /	AHIP			1	