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WITNESS REGISTRATION

H	C 22 ' 2 2 1		
Committee Name: 1	nan Services &	rlousing	
Public Hearing on:	2903	Date:	416117
Please register if you wish to	testify on the above-named measure/	issue. <u>Please</u>	print legibly.
Name	Organization or County of	f Check if you	Position on Measure

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
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