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WITNESS REGISTRATION

Committee Name: _	Hous	e Judio	ciary	
Public Hearing on:	HB	3152		Date: 4/6/2017
Places register if you	ı wich to t	ostify on the a	hove-named mes	asure/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
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