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# WITNESS REGISTRATION

**Committee Name:** HOUSE JUDICIARY

**Public Hearing on:** SB 247 **Date:** 5/3/2017

**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 | | |
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| | | | For | Against | Neutral |
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