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WITNESS REGISTRATION

Committee Name:	SENATE VETERANS &			
Public Hearing on:	HCR 22	Date:	19/	2017
Please register if you	wish to testify on the above-named mea	asure/issue. <i>Please pi</i>	int leg	gibly.

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
THEP OLSON					
2					