PUBLIC RECORD: This form, your verbal testimony, and materials you distribute will be posted on the Internet and accessible to the public.

## **WITNESS REGISTRATION**

Committee Name:	HSE. REVENUE	
Public Hearing on: _	SB 304	Date: 5-90-17

Please register if you wish to testify on the above-named measure/issue. <u>Please print legibly</u>.

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
VEFF HENDERSON	DEPT OF PEVENUE		X		
ÿ.					
			=		