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WITNESS REGISTRATION

Committee Name: _	House	Committee	on Rul	æs				
Public Hearing on:	5B 3	17 A		Date:_	5-30-2017			
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		
	1 1:5%		For	Against	Neutral
Michael Mason	aguille ladian		/		
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