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: _	Joint	Commi	tee on Tax Credits
Public Hearing on:	5B	145	Date: 6/9/17
Please register if you	ı wish to te	estify on the	ahove-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		
		and mooning.	For	Against	Neutral
Phil Donovan	Confederated Tribes of Uma	hlla	X		
Phil Donovan Michael O. Mason	Confederated Tribes of Una Confederated Tribes of Worm Springs				

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## WITNESS REGISTRATION

Committee Name: _	Joint	Committee	on Tax				
Public Hearing on:	58	145		Date:_	6/9/17		
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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