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WITNESS REGISTRATION

Committee Name: Joint Ways and Means	Subcommittee on Human Service
Public Hearing on: 5B 419	Date: 6-21-2017
Please register if you wish to testify on the above-name	d 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		
<i>f</i>		and meeting.	For	Against	Neutral
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