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## WITNESS REGISTRATION

Committee Name:	Senate Committee an	Health Care						
Public Hearing on:	5B 60	Date: 2/2/17						
Please register if you	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		
			For	Against	Neutral
TATHLEON Haley DR. DON GIRARD Raiph Read	MUITNOMAH				
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