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## WITNESS REGISTRATION

Committee Name: _	House Health Care									
Public Hearing on:	HB 2329	Date: 2 3								
Please register if you	e 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
_	- Churley HILL	BPE		X		
_	LaReé Felton	BPE		X		
_	- Churley Hill LaReé Felton - Robert Lundblad	OvagouPsych Assoc			X	