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WITNESS REGISTRATION

Committee Name: House Committee on Health Care					
Public Hearing on: 14B 230	>	Date:	2/8/	17_	
Please register if you wish to testify					<u>v</u> .
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
Lilian Starshorty	OHA		X		
Sylvie Donaldson Andrea Salinas	HLO		X		
Andrea Salinas	SEILLY AFSCA	rE			