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WITNESS REGISTRATION

Committee Name:	Senate Judici	ary
Public Hearing on:	SB 63	Date:
Please register if you	wish to testify on the above-r	amed measure/issue Please nrint 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
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