PUBLIC RECORD: This form, your verbal testimony, and materials you distribute will be posted on the Internet and accessible to the public.

WITNESS REGISTRATION

Committee Name:	House do	111111	me 9	Notiv	al le	source s	>	
Public Hearing on:	56 150	1			Date:_	152 27	=18	
Please register if yo	u wish to testify	on the abov	e-named 1	neasure/iss	ue. <i>Pleas</i>	e print le	gibly.	
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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
Jon Chandler	State Fair Council		X		
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