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WITNESS REGISTRATION

Committee Name: _	HNR					
Public Hearing on: _	HB 2293	Date: 2/26/17				
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		
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