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WITNESS REGISTRATION

Committee Name: _	SENR						
Public Hearing on: _	SB 445	Da	ate:_	02	28)	2019	
Please register if you	ı wish to testify on the a	above-named measure/issue. Ple	ease	e pri	nt l	egibly	

	Name PRINT LEGIBLY	Organization or County of Residence	Check if you live more than 100 miles from this meeting.	Position on Measure			
			tins meeting.	For	Against	Neutral	
	Rian Hooff Michelle Delepine Anna Freitas Helmath Roga	DEQ				X	
	Michelle Delepine	WMSWCO		X			
	Anna Freitas	OR Association of Conservation Domicts		, *		2	
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