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WITNESS REGISTRATION

Committee Name:	House-Human	Services \$	Housing
Public Hearing on: _	HB 2349	Date:_	2/20/19
Please register if you	wish to testify on the above-named	measure/issue. <i>Pleas</i>	e print 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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