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WITNESS REGISTRATION

Committee Name: SENR				
Public Hearing on: 48 2914 A	_ Date:_	05	107	2019
Please register if you wish to testify on the above-named measure/issue.	<u>Pleas</u>	e prin	t leg	ibly.

Name PRINT LEGIBLY	Organization or County of Residence	Check if you live more than 100 miles from this meeting.	Position on Measure			
		I meeting.	For	Against	Neutral	
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