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:	Hou	150	Healt	h care			
Public Hearing on:	5B	134	A		_ Date: <u>05</u>	114/2	019
						NOT SEE NAME OF	

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		
			For	Against	Neutral
JACKIEMERCER	NARA				
Jackie Mercer Amy Smith Jeston Black	NARA AOC Multo				
Jeston Black	Multco				