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## WITNESS REGISTRATION

Committee Name:	Hou	se He	elth	Care	
Public Hearing on:	SB	1039	A		Date: 05/16/2019

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
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