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## WITNESS REGISTRATION

Committee Name: _	SFR				
Public Hearing on:	SB	393	A	_ Date:_	5/21/19
Please register if you	ı wish to	testify on	the above-named measure/issue.	Please	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
Mex McHaddad	Blue Mtn. Trans. Dist.	7	~		