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WITNESS REGISTRATION

Committee Name: House Health Care	2
Public Hearing on: 58 665 A	Date: 65/21/2019
Please register if you wish to testify on the above-named measure/iss	sue. 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	
		tills meeting.	For Against	Neutral
Richard Davera	OSBA			