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## WITNESS REGISTRATION

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Committee Name: House (	Committee on Ru	es	
Public Hearing on: HB ZZ	66	Date:(	6-03-2019
Please register if you wish to testify	on the above-named measure/issu	e. <u>Please</u>	print legibly.
Nama	Organization or County of	Check if you	Position on Measure

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