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WITNESS REGISTRATION

Please register if you	ı wish to testify on the above-named measure/issue.	<u>Please</u>	e print legibly.
Public Hearing on:	SCR 208	_ Date:_	02/24/2020
Committee Name: _	HED		

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
(8)					