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## WITNESS REGISTRATION

Committee Name: _	Senate	Committee	on Rules						
Public Hearing on: _	SJR	201		_ Date:_	3-3-2020				
Please register if you wish to testify on the above-named measure/issue. <i>Please print legibly</i> .									

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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