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## WITNESS REGISTRATION

Committee Name: Sergte Health Care	
Public Hearing on: <u>SB 1504</u>	Date: Feb 2 <sup>nd</sup> 2016
Please register if you wish to testify on the above-named mea	sure/issue. 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		
			For	Against	Neutral
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