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WITNESS REGISTRATION

Committee Name: _	House Committee on Rules	
Public Hearing on:	HB 4135	Date: 2/5/16
Please register if you	ı wish to testify on the above-named measuı	re/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
Sina Zejdlik	Grenor, office		V		
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