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COMMITTEE HEARING REGISTRATION SLIP

Name: JOE ENDRIZZI Date: 01 3015
Address: 236 S 17th PL.
I represent:
Legislation: 15 - 08 13.
(Please fill out a separate sheet for each piece of legislation in which you are interested.)
Please check only One (1) of the following six (6):
() I wish to speak in favor of the legislation.
() I wish to speak in opposition of the legislation
() I wish to register in favor of the legislation
() I wish to register in opposition of the legislation
I'm in favor of the legislation, but only here to answer questions
() I'm in opposition of the legislation, but only here to answer questions