

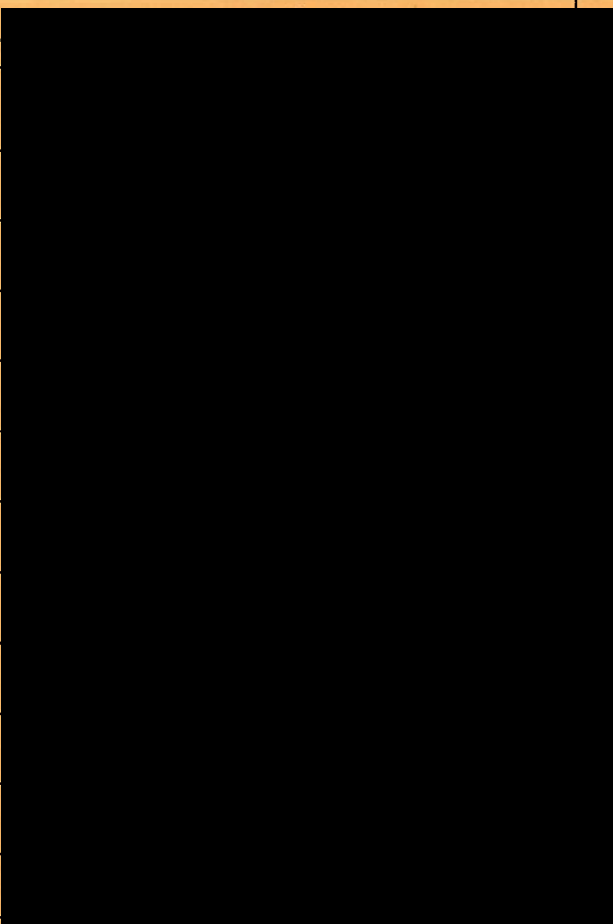
Committee HHS

Hearing Date: 1/26/24

LB/LR # 1143

Page: _____

This form is intended for those present at the public hearing to indicate their support or opposition without publicly testifying. It will appear in the official records of the committee.

Name (please print)	Address	Support	Oppose	Neutral
LEMPA VERMONT		<input checked="" type="checkbox"/>		