SUBMITTED: 05/22/2019 8:22 AM

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Hearing Date: 5/21/2019 Today's Date: 5/22/2019

Agency: Ohio Dept. of Aging Rule Number(s): 173-39-04

If no comments at the hearing, please check the box. \square

List organizations or individuals giving or submitting testimony before, during or after the public hearing and indicate the rule number(s) in question.

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Hearing Summary Report

16. Click here to enter text.

Consolidated Summary of Comments Received

Please review all comments received and complete a consolidated summary paragraph of the comments and indicate the rule number(s).

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Hearing Summary Report

Incorporated Comments into Rule(s)

Indicate how comments received during the hearing process were incorporated into the rule(s). If no comments were incorporated, explain why not.

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