SUBMITTED: 01/05/2024 9:53 AM

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Hearing Date: 1/4/2024 Today's Date: 1/5/2024

Agency: Ohio Department of Job and Family Services

Rule Number(s): 5101:2-42-19, 5101:2-42-19.2

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.

- 1. Click here to enter text.
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HSR p(198605) d: (840772) print date: 05/09/2024 4:34 PM

## **Hearing Summary Report**

## **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).

## **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.