



MISSOURI HOUSE OF REPRESENTATIVES  
**WITNESS APPEARANCE FORM**

BILL NUMBER: <b>HB 1123</b>		DATE: <b>2/24/2021</b>	
COMMITTEE: <b>Judiciary</b>			
<b>TESTIFYING:</b> <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
<b>WITNESS NAME</b>			
<b>INDIVIDUAL:</b>			
WITNESS NAME: <b>ARNIE C. AC "HONEST-ABE" DIENOFF-STATE PUBLIC ADVO</b>		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: <b>arniedienoff@yahoo.com</b>		ATTENDANCE: <b>Written</b>	SUBMIT DATE: <b>2/24/2021 11:42 PM</b>

**THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.**

**I am in Support of this Bill to Support the Protection of Our State's Children. Our Children must ne Our first-priority!**



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<b>WITNESS NAME</b>			
<b>BUSINESS/ORGANIZATION:</b>			
WITNESS NAME: <b>CAITLIN WHALEY</b>		PHONE NUMBER: <b>573-751-4815</b>	
BUSINESS/ORGANIZATION NAME: <b>DEPARTMENT OF SOCIAL SERVICES</b>		TITLE: <b>LEGISLATIVE DIRECTOR</b>	
ADDRESS: <b>221 W HIGH ST</b>			
CITY: <b>JEFFERSON CITY</b>		STATE: <b>MO</b>	ZIP: <b>65101</b>
EMAIL: <b>caitlin.n.whaley@dss.mo.gov</b>	ATTENDANCE: <b>In-Person</b>		SUBMIT DATE: <b>2/24/2021 5:05 PM</b>
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<b>WITNESS NAME</b>			
<b>BUSINESS/ORGANIZATION:</b>			
WITNESS NAME: <b>RUTH EHRESMAN</b>		PHONE NUMBER: <b>314-504-3616</b>	
BUSINESS/ORGANIZATION NAME: <b>VISION FOR CHILDREN AT RISK</b>		TITLE: <b>ADVOCACY COORDINATOR</b>	
ADDRESS: <b>1000 N. VANDEVENTER</b>			
CITY: <b>ST. LOUIS</b>		STATE: <b>MO</b>	ZIP: <b>63113</b>
EMAIL: <b>rehresman@visionforchildren.org</b>	ATTENDANCE: <b>Written</b>		SUBMIT DATE: <b>2/22/2021 10:05 AM</b>

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Several provisions of the bill lead Vision for Children at Risk to oppose HB1143 unless these are removed.