



MISSOURI HOUSE OF REPRESENTATIVES  
**WITNESS APPEARANCE FORM**

BILL NUMBER: <b>HB 384</b>		DATE: <b>2/1/2021</b>	
COMMITTEE: <b>Workforce Development</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>BUSINESS/ORGANIZATION:</b>			
WITNESS NAME: <b>BEN TERRELL</b>		PHONE NUMBER: <b>573-751-3577</b>	
BUSINESS/ORGANIZATION NAME: <b>MISSOURI DEPARTMENT OF LABOR &amp; INDUSTRIAL RELATIONS</b>		TITLE: <b>LEGISLATIVE LAISION</b>	
ADDRESS: <b>421 E. DUNKLIN STREET</b>			
CITY: <b>JEFFERSON CITY</b>		STATE: <b>MO</b>	ZIP: <b>65101</b>
EMAIL:	ATTENDANCE:	SUBMIT DATE: <b>2/1/2021 12:00 AM</b>	
<b>THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.</b>			



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<b>WITNESS NAME</b>			
<b>REGISTERED LOBBYIST:</b>			
WITNESS NAME: <b>BRAD JONES</b>		PHONE NUMBER: <b>619-3077</b>	
REPRESENTING: <b>NATIONAL FEDERATION OF INDEPENDANT BUSINESS</b>		TITLE:	
ADDRESS: <b>308 E. HIGH</b>			
CITY: <b>JEFFERSON CITY</b>		STATE: <b>MO</b>	ZIP: <b>65101</b>
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<b>WITNESS NAME</b>			
<b>REGISTERED LOBBYIST:</b>			
WITNESS NAME: <b>MATTHEW PANIK</b>		PHONE NUMBER: <b>573-634-3511</b>	
REPRESENTING: <b>MISSOURI CHAMBER OF COMMERCE AND INDUSTRY</b>		TITLE:	
ADDRESS: <b>428 EAST CAPITOL AVENUE</b>			
CITY: <b>JEFFERSON CITY</b>		STATE: <b>MO</b>	ZIP: <b>65101</b>
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<b>WITNESS NAME</b>			
<b>REGISTERED LOBBYIST:</b>			
WITNESS NAME: <b>MIKE WINTER</b>		PHONE NUMBER: <b>573-230-6644</b>	
REPRESENTING: <b>MISSOURI SELF INSURERS ASSOCIATON</b>		TITLE:	
ADDRESS: <b>P.O. BOX 305</b>			
CITY: <b>JEFFERSON CITY</b>		STATE: <b>MO</b>	ZIP: <b>65102</b>
EMAIL:	ATTENDANCE:	SUBMIT DATE: <b>2/1/2021 12:00 AM</b>	

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<b>WITNESS NAME</b>			
<b>REGISTERED LOBBYIST:</b>			
WITNESS NAME: <b>RAY MCCARTY</b>		PHONE NUMBER: <b>573-634-2246</b>	
REPRESENTING: <b>ASSOCIATED INDUSTRIES OF MISSOURI</b>		TITLE:	
ADDRESS: <b>3234 W. TRUMAN BLVD.</b>			
CITY: <b>JEFFERSON CITY</b>		STATE: <b>MO</b>	ZIP: <b>65109</b>
EMAIL:	ATTENDANCE:	SUBMIT DATE: <b>2/1/2021 12:00 AM</b>	
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<b>WITNESS NAME</b>			
<b>REGISTERED LOBBYIST:</b>			
WITNESS NAME: <b>TONY REINHART</b>		PHONE NUMBER: <b>2002-361-6502</b>	
REPRESENTING: <b>FORD MOTOR COMPANY</b>		TITLE:	
ADDRESS: <b>8121 NE HIGHWAY 69</b>			
CITY: <b>CLAYCOMO</b>		STATE: <b>MO</b>	ZIP: <b>64119</b>
EMAIL:	ATTENDANCE:	SUBMIT DATE: <b>2/1/2021 12:00 AM</b>	
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<b>WITNESS NAME</b>			
<b>REGISTERED LOBBYIST:</b>			
WITNESS NAME: <b>David</b>		PHONE NUMBER: <b>573 636 2524</b>	
REPRESENTING: <b>MISSOURI RETAILERS ASSOCIATION</b>		TITLE: <b>President</b>	
ADDRESS: <b>618 E Capitol</b>			
CITY: <b>Jefferson City</b>		STATE: <b>MO</b>	ZIP: <b>65101</b>
EMAIL: <b>dave@moretailers.com</b>	ATTENDANCE: <b>Written</b>		SUBMIT DATE: <b>2/1/2021 11:57 AM</b>

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**We agree with Associated Industries of Missouri that the supplemental second injury fund surcharge does not need to exceed 2% to meet the obligations of the fund.**



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<b>WITNESS NAME</b>			
<b>BUSINESS/ORGANIZATION:</b>			
WITNESS NAME: <b>JEFF L. PITTMAN</b>		PHONE NUMBER: <b>812-249-3713</b>	
BUSINESS/ORGANIZATION NAME: <b>ST. LOUIS COMMUNITY COLLEGE</b>		TITLE: <b>CHANCELLOR</b>	
ADDRESS: <b>3221 MCKELVEY ROAD</b>			
CITY: <b>BRIDGETON</b>		STATE: <b>MO</b>	ZIP:
EMAIL:	ATTENDANCE:	SUBMIT DATE: <b>2/1/2021 12:00 AM</b>	
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<b>BUSINESS/ORGANIZATION:</b>			
WITNESS NAME: <b>JOE GILGOUR</b>		PHONE NUMBER: <b>660-619-6079</b>	
BUSINESS/ORGANIZATION NAME: <b>MINERAL AREA COLLEGE</b>		TITLE: <b>PRESIDENT</b>	
ADDRESS: <b>5270 FLAT RIVER ROAD</b>			
CITY: <b>PARK HILLS</b>		STATE: <b>MO</b>	ZIP: <b>63601</b>
EMAIL:	ATTENDANCE:	SUBMIT DATE: <b>2/1/2021 12:00 AM</b>	
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