



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 742		DATE: 3/22/2021	
COMMITTEE: Crime Prevention			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: ARNIE C. AC "HONEST-ABE" DIENOFF-STATE PUBLIC ADVO		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: arniedienoff@yahoo.com		ATTENDANCE: Written	SUBMIT DATE: 3/22/2021 1:37 PM

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

This Bill shall also Apply to all Missourians



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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: BRAD THIELEMIER		PHONE NUMBER: 573-301-5853	
REPRESENTING: MISSOURI STATE TROOPERS ASSOCIATION		TITLE: DIRECTOR OF LEGISLATIVE AFFAIRS	
ADDRESS: 1729 E ELM ST			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101
EMAIL: bradt@missouritrooper.com	ATTENDANCE: In-Person		SUBMIT DATE: 3/22/2021 11:32 AM
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Support bill



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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: DALE SCHMIDT		PHONE NUMBER: 816-581-3767	
BUSINESS/ORGANIZATION NAME: MISSOURI PEACE OFFICERS ASSOCIATION		TITLE: EXECUTIVE DIRECTOR	
ADDRESS: 101 WEST MCCARTY STREET, SUITE 200			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/22/2021 12:00 AM	
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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: DONALD R. VANON, JR.		PHONE NUMBER: 636-762-9799	
BUSINESS/ORGANIZATION NAME: FRATERNAL ORDER OF POLICE, LODGE 15		TITLE: PRESIDENT	
ADDRESS: 2010 COLLIER CORPORATE PARKWAY			
CITY: ST. CHARLES		STATE: MO	ZIP: 63303
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/22/2021 12:00 AM	
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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: JOE PATTERSON		PHONE NUMBER: 314-520-1540	
BUSINESS/ORGANIZATION NAME: ST. LOUIS COUNTY POLICE ASSOCIATION, FRATERNAL ORDER OF POLICE, LODGE 111		TITLE: EXECUTIVE DIRECTOR	
ADDRESS: 115 BAXTER ROAD			
CITY: ST. LOUIS		STATE: MO	ZIP: 63011
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/22/2021 12:00 AM	
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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: KELLY COPE		PHONE NUMBER: 636-344-7600	
BUSINESS/ORGANIZATION NAME: SAINT CHARLES COUNTY AMBULANCE DISTRICT		TITLE: CHIEF	
ADDRESS: 4169 OLD MILL PARKWAY			
CITY: SAINT PETERS		STATE: MO	ZIP: 63376
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/22/2021 12:00 AM	
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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: KEVIN AHLBRAND		PHONE NUMBER: 573-632-4209	
BUSINESS/ORGANIZATION NAME: MISSOURI FRATERNAL ORDER OF POLICE		TITLE: LEGISLATIVE DIRECTOR	
ADDRESS: 715 JEFFERSON STREET			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/22/2021 12:00 AM	
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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: MARK HABBAS		PHONE NUMBER: 314-393-9757	
REPRESENTING: MISSOURI STATE COUNCIL OF FIREFIGHTERS		TITLE:	
ADDRESS: 115 MCENAMY ROAD			
CITY: ST. PETERS		STATE: MO	ZIP: 63376
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/22/2021 12:00 AM	

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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: SCOTT SWAIN		PHONE NUMBER:	
REPRESENTING: MISSOURI POLICE CHIEFS ASSOCIATION		TITLE:	
ADDRESS:			
CITY:		STATE: MO	ZIP:
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/22/2021 12:00 AM	
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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: STEPHAEN (JAY) SCHROEDER		PHONE NUMBER: 314-353-3200	
BUSINESS/ORGANIZATION NAME: ST. LOUIS POLICE OFFICERS ASSOCIATION		TITLE: PRESIDENT	
ADDRESS: 3710 HAMPTON AVENUE			
CITY: SAINT LOUIS		STATE: MO	ZIP: 63019
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/22/2021 12:00 AM	
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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: STEPHEN NITTLER		PHONE NUMBER: 573-634-3415	
REPRESENTING: MISSOURI ASSOCIATION OF OSTEOPATHIC PHYSICIANS AND SURGEONS (MAOPS).		TITLE: REGISTERED LOBBYIST	
ADDRESS: 1423 RANDY LANE			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101
EMAIL: stephen@hahnodaniel.com	ATTENDANCE: Written		SUBMIT DATE: 3/22/2021 6:36 PM
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MAOPS is in support of HB 742 as believe it would help improve physician workplace safety.



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WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: ANITA GUESS		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: anitasneat@aol.com		ATTENDANCE: Written	SUBMIT DATE: 3/21/2021 10:12 PM
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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: MO DEL VILLAR		PHONE NUMBER: 816-929-6166	
REPRESENTING: AMERICAN CIVIL LIBERTIES UNION OF MISSOURI		TITLE:	
ADDRESS: 406 WEST 34TH STREET, SUITE 420			
CITY: KANSAS CITY		STATE: MO	ZIP: 64111
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/22/2021 12:00 AM	
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