

BILL NUMBER: HB 75				DATE: 1/26/2021
COMMITTEE: Special Committee	e on Small Business			
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: ALEX FECHNER			PHONE NUME	BER:
BUSINESS/ORGANIZATION	ON NAME:		TITLE:	
ADDRESS:				
CITY:			STATE:	ZIP:
EMAIL:		ATTENDANCE:	SUBMIT 0 1/26/20	DATE: 121 12:00 AM
THE INFORMA	TION ON THIS FORM	I IS PUBLIC RECORD	UNDER CHA	PTER 610. RSMo.



BILL NUMBER: HB 75				DAT 1/2	E: 16/2021
COMMITTEE: Special Committe	e on Small Business			·	
TESTIFYING:	✓ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INF	ORMATIO	NAL PURPOSES
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: ALEXIS SCHUBER			PHONE	E NUMBER:	
BUSINESS/ORGANIZATION	ON NAME:		TITLE:		
ADDRESS:			·		
CITY:			STATE	<u>:</u> :	ZIP:
EMAIL:		ATTENDANCE:	St. 1/	JBMIT DATE: /26/2021 1:	2:00 AM
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECOR	D UNDER	CHAPTE	R 610. RSMo.



BILL NUMBER: HB 75				DAT 1/2	E: 16/2021
COMMITTEE: Special Committee	e on Small Business			•	
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFO	ORMATIO	NAL PURPOSES
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: ALYSSA SANDER			PHONE	NUMBER:	
BUSINESS/ORGANIZATIO	DN NAME:		TITLE:		
ADDRESS:			·		
CITY:			STATE:		ZIP:
EMAIL:		ATTENDANCE:	SUE 1/2	BMIT DATE: 26/2021 1:	2:00 AM
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECOR	D UNDER C	HAPTE	R 610. RSMo.



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COMMITTEE: Special Committee	e on Small Business				
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOS	ES
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: ALYXA BREANNE	DREW		PHONE NUMI	BER:	
BUSINESS/ORGANIZATIO	ON NAME:		TITLE:		
ADDRESS:			·		
CITY:			STATE:	ZIP:	
EMAIL:		ATTENDANCE:	SUBMIT 1/26/20	DATE:)21 12:00 AM	
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TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
BUSINESS/ORG	ANIZATION:			
WITNESS NAME: ANGELA SNYDER			PHONE NUME 314-939-1	
BUSINESS/ORGANIZATION KT'S SALOON	N NAME:		TITLE: OWNER	
ADDRESS: 4574 TELEGRAPH	ROAD			
CITY: ST. LOUIS			STATE: MO	ZIP: 63129
EMAIL:		ATTENDANCE:	SUBMIT I 1/26/20	DATE: 121 12:00 AM
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECOR	D UNDER CHA	PTER 610. RSMo.



BILL NUMBER: HB 75				DA ⁻ 1/2	TE: 2 6/2021
COMMITTEE: Special Committee	e on Small Business			•	
TESTIFYING:	☑IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR II	NFORMATIC	NAL PURPOSES
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: ASHLEE SPROCK			PHO	ONE NUMBER:	
BUSINESS/ORGANIZATIO	DN NAME:		TITI	LE:	
ADDRESS:					
CITY:			STA	ATE:	ZIP:
EMAIL:		ATTENDANCE:		SUBMIT DATE: 1/26/2021 1	2:00 AM
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECOR	D UNDE	R CHAPTE	R 610. RSMo.



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COMMITTEE: Special Committee	e on Small Business			•	
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFO	ORMATIO	NAL PURPOSES
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: BAEDEN JONES			PHONE	NUMBER:	
BUSINESS/ORGANIZATIO	ON NAME:		TITLE:		
ADDRESS:			·		
CITY:			STATE:		ZIP:
EMAIL:		ATTENDANCE:	SUE 1/2	BMIT DATE: 26/2021 1:	2:00 AM
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COMMITTEE: Special Committee	e on Small Business		,	
TESTIFYING:	☑IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: BENJAMIN BROW	/N		PHONE NUME	ER:
BUSINESS/ORGANIZATIO	ON NAME:		TITLE:	
ADDRESS:			·	
CITY:			STATE:	ZIP:
EMAIL:		ATTENDANCE:	SUBMIT D 1/26/20	OATE: 21 12:00 AM
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BILL NUMBER: HB 75				DAT 1/2	re: 26/2021
COMMITTEE: Special Committee	e on Small Business			•	
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFO	RMATIC	NAL PURPOSES
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: BENJAMIN J KUR	Z		PHONE N	NUMBER:	
BUSINESS/ORGANIZATION	ON NAME:		TITLE:		
ADDRESS:					
CITY:			STATE:		ZIP:
EMAIL:		ATTENDANCE:	SUB 1/2	MIT DATE: 6/2021 1	2:00 AM
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TESTIFYING:	☑IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: BILLY HEINTZMAI	NN		PHONE NUME	BER:
BUSINESS/ORGANIZATIO	ON NAME:		TITLE:	
ADDRESS:			·	
CITY:			STATE:	ZIP:
EMAIL:		ATTENDANCE:	SUBMIT D 1/26/20	OATE: 21 12:00 AM
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COMMITTEE: Special Committee	e on Small Business			•	
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR I	NFORMATIC	NAL PURPOSES
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: BRIAN WATSON			PH	ONE NUMBER:	
BUSINESS/ORGANIZATION	ON NAME:		TIT	LE:	
ADDRESS:					
CITY:			STA	ATE:	ZIP:
EMAIL:		ATTENDANCE:		SUBMIT DATE: 1/26/2021 1	2:00 AM
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TESTIFYING:	✓ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: BRITTANY BLACK	‹		PHONE NUME	BER:
BUSINESS/ORGANIZATION	ON NAME:		TITLE:	
ADDRESS:			·	
CITY:			STATE:	ZIP:
EMAIL:		ATTENDANCE:	SUBMIT [1/26/20	DATE: 121 12:00 AM
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TESTIFYING:	✓ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INI	FORMATIC	NAL PURPOSES
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: BRYANT J. BONA	NO		PHON	NE NUMBER:	
BUSINESS/ORGANIZATION	ON NAME:		TITLE	<u>:</u> :	
ADDRESS:			·		
CITY:			STAT	E:	ZIP:
EMAIL:		ATTENDANCE:	9 1	SUBMIT DATE: 1/26/2021 1	2:00 AM
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TESTIFYING:	☑IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: CAMERON SANKO	OWSKI		PHONE NUMB	BER:
BUSINESS/ORGANIZATIO	ON NAME:		TITLE:	
ADDRESS:			·	
CITY:			STATE:	ZIP:
EMAIL:		ATTENDANCE:	SUBMIT D 1/26/20	OATE: 21 12:00 AM
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COMMITTEE: Special Committee	e on Small Business		·	
TESTIFYING:	☑IN SUPPORT OF	☐ IN OPPOSITION TO		ATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: CHARLES FERRE	TTI		PHONE NUMB	BER:
BUSINESS/ORGANIZATIO	ON NAME:		TITLE:	
ADDRESS:			·	
CITY:			STATE:	ZIP:
EMAIL:		ATTENDANCE:	SUBMIT D 1/26/20	OATE: 21 12:00 AM
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COMMITTEE: Special Committee	e on Small Business			•	
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFO	ORMATIO	NAL PURPOSES
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: CHLOE E GRETAR	<		PHONE	NUMBER:	
BUSINESS/ORGANIZATIO	ON NAME:		TITLE:		
ADDRESS:			·		
CITY:			STATE:		ZIP:
EMAIL:		ATTENDANCE:	SUE 1/2	BMIT DATE: 26/2021 1:	2:00 AM
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TESTIFYING:	✓ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR IN	FORMATIC	NAL PURPOSES
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: CHRISTOPHER BA	AKER		PHO	NE NUMBER:	
BUSINESS/ORGANIZATION	ON NAME:		TITLE	≣:	
ADDRESS:			·		
CITY:			STAT	E:	ZIP:
EMAIL:		ATTENDANCE:	5	SUBMIT DATE: 1/26/2021 1	2:00 AM
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TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFO	RMATIC	NAL PURPOSES
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: CORY J. BRANCH			PHONE I	NUMBER:	
BUSINESS/ORGANIZATIO	DN NAME:		TITLE:		
ADDRESS:					
CITY:			STATE:		ZIP:
EMAIL:		ATTENDANCE:	SUB 1/2	MIT DATE: 6/2021 1	2:00 AM
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TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR I	NFORMATION	ONAL PURPOSES
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: DANIEL BLUNK-P	IPER		PH	ONE NUMBER:	
BUSINESS/ORGANIZATION	ON NAME:		TIT	LE:	
ADDRESS:					
CITY:			STA	ATE:	ZIP:
EMAIL:		ATTENDANCE:		SUBMIT DATE: 1/26/2021	
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COMMITTEE: Special Committee	e on Small Business			·	
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR I	NFORMATIC	ONAL PURPOSES
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: DAVID KUNCE			PH	ONE NUMBER:	
BUSINESS/ORGANIZATION	ON NAME:		TIT	LE:	
ADDRESS:					
CITY:			STA	ATE:	ZIP:
EMAIL:		ATTENDANCE:		SUBMIT DATE: 1/26/2021 1	2:00 AM
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TESTIFYING:	☑IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
REGISTERED LO	DBBYIST:			
WITNESS NAME: DAVID OVERFELT			PHONE NUME 573-636-2	
REPRESENTING: MISSOURI RETAIL	ERS ASSOCIATION		TITLE:	
ADDRESS: 618 EAST CAPITO	L			
CITY: JEFFERSON CITY			STATE: MO	ZIP: 65102
EMAIL:		ATTENDANCE:	SUBMIT DATE: 1/26/2021 12:00 AM	
THE INFORMAT	TION ON THIS FOR	M IS PUBLIC RECOR	D UNDER CHA	PTER 610. RSMo.



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TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: DEON GLASPY			PHONE NUME	BER:
BUSINESS/ORGANIZATIO	ON NAME:		TITLE:	
ADDRESS:			·	
CITY:			STATE:	ZIP:
EMAIL:		ATTENDANCE:	SUBMIT D 1/26/20	OATE: 21 12:00 AM
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COMMITTEE: Special Committee	e on Small Business			•	
TESTIFYING:	☑IN SUPPORT OF	☐ IN OPPOSITION TO		NFORMATIC	NAL PURPOSES
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: DILLON WALKER			PHO	ONE NUMBER:	
BUSINESS/ORGANIZATIO	DN NAME:		TITI	_E:	
ADDRESS:			·		
CITY:			STA	ATE:	ZIP:
EMAIL:		ATTENDANCE:	·	SUBMIT DATE: 1/26/2021 1	2:00 AM
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COMMITTEE: Special Committee	e on Small Business		,	
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: ELI MILLER			PHONE NUME	BER:
BUSINESS/ORGANIZATIO	ON NAME:		TITLE:	
ADDRESS:				
CITY:			STATE:	ZIP:
EMAIL:		ATTENDANCE:	SUBMIT D 1/26/20	DATE: 121 12:00 AM
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COMMITTEE: Special Committe	COMMITTEE: Special Committee on Small Business					
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFO	RMATIC	NAL PURPOSES	
		WITNESS NAME				
INDIVIDUAL:						
WITNESS NAME: EMILY BOND			PHONE N	UMBER:		
BUSINESS/ORGANIZATION	ON NAME:		TITLE:			
ADDRESS:						
CITY:			STATE:		ZIP:	
EMAIL:		ATTENDANCE:	SUBM 1/26	MIT DATE: 5/2021 1	2:00 AM	
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECOR	D UNDER C	HAPTE	R 610. RSMo.	



BILL NUMBER: HB 75				DATE: 1/26/2021
COMMITTEE: Special Committe	e on Small Business			
TESTIFYING:	✓ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	MATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: EMILY ROSE JAC	KSON		PHONE NUM	BER:
BUSINESS/ORGANIZATION	ON NAME:		TITLE:	
ADDRESS:			·	
CITY:			STATE:	ZIP:
EMAIL:		ATTENDANCE:	SUBMIT 1/26/2	DATE: 021 12:00 AM
THE INFORMA	TION ON THIS FORI	M IS PUBLIC RECORE	UNDER CHA	APTER 610, RSMo.



BILL NUMBER: HB 75				DAT 1/2	E: 16/2021
COMMITTEE: Special Committe	e on Small Business			·	
TESTIFYING:	✓ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INF	ORMATIO	NAL PURPOSES
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: ERIC KOPSKY			PHONE	E NUMBER:	
BUSINESS/ORGANIZATION	ON NAME:		TITLE:		
ADDRESS:			·		
CITY:			STATE	<u>:</u> :	ZIP:
EMAIL:		ATTENDANCE:	St 1/	JBMIT DATE: 126/2021 1	2:00 AM
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COMMITTEE: Special Committe	COMMITTEE: Special Committee on Small Business					
TESTIFYING:	✓ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR IN	IFORMATIC	NAL PURPOSES	
		WITNESS NAME				
INDIVIDUAL:						
WITNESS NAME: HALEY LYNN CAL	CATERRA		PHO	NE NUMBER:		
BUSINESS/ORGANIZATION	ON NAME:		TITL	E:		
ADDRESS:						
CITY:			STA	TE:	ZIP:	
EMAIL:		ATTENDANCE:		SUBMIT DATE: 1/26/2021 1	2:00 AM	
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TESTIFYING:	☑IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
BUSINESS/ORG	ANIZATION:			
WITNESS NAME: JACOB KULP			PHONE NUME 610-972-0	
BUSINESS/ORGANIZATION PA DUTCH CONST			TITLE: OWNER	
ADDRESS: 4907 PERSHING PLACE				
CITY: ST. LOUIS			STATE: MO	ZIP: 63108
EMAIL:		ATTENDANCE:	SUBMIT I 1/26/20	DATE: 121 12:00 AM
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECOR	D UNDER CHA	PTER 610, RSMo.



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TESTIFYING:	✓ IN SUPPORT OF	☐ IN OPPOSITION TO		ATIONAL PURPOSES
		WITNESS NAME		
BUSINESS/ORG	ANIZATION:			
WITNESS NAME: JARED ATER			PHONE NUME 314-974-1	
BUSINESS/ORGANIZATION WHEELHOUSE	N NAME:		TITLE: OWNER/M	IANAGING PARTNER
ADDRESS: 1000 SPRUCE STREET				
CITY: ST. LOUIS			STATE: MO	ZIP: 63102
EMAIL:		ATTENDANCE:	SUBMIT 0 1/26/20	DATE: 121 12:00 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.				



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TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: JASON LOPEZ			PHONE NUME	BER:
BUSINESS/ORGANIZATIO	ON NAME:		TITLE:	
ADDRESS:			·	
CITY:			STATE:	ZIP:
EMAIL:		ATTENDANCE:	SUBMIT D 1/26/20	OATE: 21 12:00 AM
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TESTIFYING:	☑IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES	
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: JASON MOORE			PHONE NUME	BER:	
BUSINESS/ORGANIZATIO	ON NAME:		TITLE:		
ADDRESS:			·		
CITY:			STATE:	ZIP:	
EMAIL:		ATTENDANCE:	SUBMIT D 1/26/20	DATE: 121 12:00 AM	
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TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	□FOR	INFORMAT	IONAL PURPOSES	
		WITNESS NAME				
INDIVIDUAL:						
WITNESS NAME: JENIFER MARIE N	I CGOUGH		Ph	HONE NUMBER:	:	
BUSINESS/ORGANIZATION	ON NAME:		TI	TLE:		
ADDRESS:						
CITY:			ST	ΓΑΤΕ:	ZIP:	
EMAIL:		ATTENDANCE:		SUBMIT DATE 1/26/2021	E: 12:00 AM	
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TESTIFYING:	☑IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES		
		WITNESS NAME				
INDIVIDUAL:						
WITNESS NAME: JESSICA PLAKOV	/IC		PHONE NUMB	ER:		
BUSINESS/ORGANIZATIO	ON NAME:		TITLE:			
ADDRESS:			·			
CITY:			STATE:	ZIP:		
EMAIL:		ATTENDANCE:	SUBMIT D 1/26/20	OATE: 21 12:00 AM		
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TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	□FOR	INFORMATI	ONAL PURPOSES	
		WITNESS NAME				
INDIVIDUAL:						
WITNESS NAME: JOE COLLINS			Ph	HONE NUMBER:		
BUSINESS/ORGANIZATION	ON NAME:		TI	TLE:		
ADDRESS:						
CITY:			ST	TATE:	ZIP:	
EMAIL:		ATTENDANCE:		SUBMIT DATE 1/26/2021		
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TESTIFYING:	☑IN SUPPORT OF	☐ IN OPPOSITION TO		ATIONAL PURPOSES	
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: JOE W. POLIZZI			PHONE NUME	BER:	
BUSINESS/ORGANIZATIO	ON NAME:		TITLE:		
ADDRESS:					
CITY:			STATE:	ZIP:	
EMAIL:		ATTENDANCE:	SUBMIT 0 1/26/20	DATE: 121 12:00 AM	
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		WITNESS NAME		
BUSINESS/ORG	ANIZATION:			
WITNESS NAME: JONATHEN LERM	IAN		PHONE NUME 314-312-2	
BUSINESS/ORGANIZATION REIGN RESTAURA	ON NAME: ANT, LLC / LERMAN K I	EATHLEY, LLC	TITLE: ATTORNE	Υ
ADDRESS: 15510 OLIVE BOULEVARD, SUITE 210				
CITY: CHESTERFIELD			STATE: MO	ZIP: 63017
EMAIL:		ATTENDANCE:	SUBMIT I 1/26/20	DATE: 021 12:00 AM
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECOR	D UNDER CHA	PTFR 610 RSMo



BILL NUMBER: HB 75				DATE: 1/26/2021
COMMITTEE: Special Committee on Small Business				
TESTIFYING:	☑IN SUPPORT OF	☐ IN OPPOSITION TO		ATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: JUSTIN RAPP			PHONE NUME	BER:
BUSINESS/ORGANIZATIO	ON NAME:		TITLE:	
ADDRESS:				
CITY:			STATE:	ZIP:
EMAIL:		ATTENDANCE:	SUBMIT 0 1/26/20	DATE: 121 12:00 AM
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECOR	D UNDER CHA	PTER 610. RSMo.



BILL NUMBER: HB 75				DATE: 1/26/2021
COMMITTEE: Special Committee on Small Business				
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: KATLYN GREENV	/ELL		PHONE NUMB	ER:
BUSINESS/ORGANIZATIO	ON NAME:		TITLE:	
ADDRESS:				
CITY:			STATE:	ZIP:
EMAIL:		ATTENDANCE:	SUBMIT D 1/26/20	OATE: 21 12:00 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.				



BILL NUMBER: HB 75				DATE: 1/26/2021
COMMITTEE: Special Committee on Small Business				
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: KEVIN BAUM			PHONE NUME	BER:
BUSINESS/ORGANIZATIO	ON NAME:		TITLE:	
ADDRESS:				
CITY:			STATE:	ZIP:
EMAIL:		ATTENDANCE:	SUBMIT D 1/26/20	DATE: 121 12:00 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.				



BILL NUMBER: HB 75				DAT 1/2	re: 26/2021
COMMITTEE: Special Committee on Small Business					
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFO	RMATIC	NAL PURPOSES
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: KRISTIN FUNKE			PHONE	NUMBER:	
BUSINESS/ORGANIZATION	ON NAME:		TITLE:		
ADDRESS:					
CITY:			STATE:		ZIP:
EMAIL:		ATTENDANCE:	SUB 1/2	MIT DATE: 6/2021 1	2:00 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.					



BILL NUMBER: HB 75				DAT 1/2	E: 6/2021
COMMITTEE: Special Committee on Small Business					
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFO	ORMATIO	NAL PURPOSES
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: LACI ROWINGS			PHONE	NUMBER:	
BUSINESS/ORGANIZATION	ON NAME:		TITLE:		
ADDRESS:					
CITY:			STATE:		ZIP:
EMAIL:		ATTENDANCE:	SUI 1/2	BMIT DATE: 26/2021 12	2:00 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.					



BILL NUMBER: HB 75				DATE: 1/26/2021
COMMITTEE: Special Committee on Small Business				
TESTIFYING:	☑IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: LACY ROWINGS			PHONE NUME	BER:
BUSINESS/ORGANIZATIO	ON NAME:		TITLE:	
ADDRESS:				
CITY:			STATE:	ZIP:
EMAIL:		ATTENDANCE:	SUBMIT D 1/26/20	DATE: 121 12:00 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.				



BILL NUMBER: HB 75				DATE: 1/26/2021
COMMITTEE: Special Committee on Small Business				
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: MADDY ROLLER			PHONE NUMB	ER:
BUSINESS/ORGANIZATIO	DN NAME:		TITLE:	
ADDRESS:			·	
CITY:			STATE:	ZIP:
EMAIL:		ATTENDANCE:	SUBMIT D 1/26/20	ATE: 21 12:00 AM
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECORI	UNDER CHA	PTER 610, RSMo.



BILL NUMBER: HB 75				DATE: 1/26/2021
COMMITTEE: Special Committee	e on Small Business			
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: MATHIUS HARRIS			PHONE NUME	BER:
BUSINESS/ORGANIZATIO	DN NAME:		TITLE:	
ADDRESS:				
CITY:			STATE:	ZIP:
EMAIL:		ATTENDANCE:	SUBMIT I 1/26/20	DATE: 121 12:00 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.				



BILL NUMBER: HB 75				DATE: 1/26/2021
COMMITTEE: Special Committee on Small Business				
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: MAURA MURRAY			PHONE NUMB	ER:
BUSINESS/ORGANIZATIO	N NAME:		TITLE:	
ADDRESS:				
CITY:			STATE:	ZIP:
EMAIL:		ATTENDANCE:	SUBMIT D 1/26/20	OATE: 21 12:00 AM
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECOR	D UNDER CHA	PTER 610. RSMo.



BILL NUMBER: HB 75				DATE: 1/26/2021
COMMITTEE: Special Committee on Small Business				
TESTIFYING:	☑IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: MAX ROBINSON			PHONE NUMB	ER:
BUSINESS/ORGANIZATIO	ON NAME:		TITLE:	
ADDRESS:				
CITY:			STATE:	ZIP:
EMAIL:		ATTENDANCE:	SUBMIT D 1/26/20	OATE: 21 12:00 AM
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECORI	D UNDER CHA	PTER 610. RSMo.



BILL NUMBER: HB 75				DATE: 1/26/2021
COMMITTEE: Special Committee on Small Business				
TESTIFYING:	✓ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	NATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: MAYOR SEAN FLO	OWER		PHONE NUM	BER:
BUSINESS/ORGANIZATION	ON NAME:		TITLE:	
ADDRESS:				
CITY:			STATE:	ZIP:
EMAIL:		ATTENDANCE:	SUBMIT 1/26/2	DATE: 021 12:00 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.				



BILL NUMBER: HB 75				DATE: 1/26/2021
COMMITTEE: Special Committee	e on Small Business		,	
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: MICHAEL WINGA	TE JR		PHONE NUME	ER:
BUSINESS/ORGANIZATIO	ON NAME:		TITLE:	
ADDRESS:			·	
CITY:			STATE:	ZIP:
EMAIL:		ATTENDANCE:	SUBMIT D 1/26/20	OATE: 21 12:00 AM
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECORI	D UNDER CHA	PTER 610. RSMo.



BILL NUMBER: HB 75				DAT 1/2	E: 6/2021
COMMITTEE: Special Committe	e on Small Business			·	
TESTIFYING:	✓ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFO	ORMATIO	NAL PURPOSES
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: MICHELLE BRAN	СН		PHONE	NUMBER:	
BUSINESS/ORGANIZATION	ON NAME:		TITLE:		
ADDRESS:					
CITY:			STATE:		ZIP:
EMAIL:		ATTENDANCE:	SUI 1/2	BMIT DATE: 26/2021 1:	2:00 AM
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECOR	D UNDER (CHAPTE	R 610. RSMo.



BILL NUMBER: HB 75					ATE: /26/2021
COMMITTEE: Special Committe	e on Small Business				
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	□FOR	INFORMATI	ONAL PURPOSES
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: MIKE ROMER			PH	HONE NUMBER:	
BUSINESS/ORGANIZATION	ON NAME:		TI	TLE:	
ADDRESS:					
CITY:			ST	TATE:	ZIP:
EMAIL:		ATTENDANCE:		SUBMIT DATE 1/26/2021	
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECOR	D UNDE	R CHAPT	ER 610. RSMo.



BILL NUMBER: HB 75				DATE: 1/26/2021
COMMITTEE: Special Committee	e on Small Business			
TESTIFYING:	☑IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
BUSINESS/ORG	ANIZATION:			
WITNESS NAME: NICHOLAS V DEL	GAISO		PHONE NUME 314-565-9	
BUSINESS/ORGANIZATION WHEELHOUSE	DN NAME:		TITLE: MANAGIN	IG PARTNER
ADDRESS: 1000 SPRUCE STF	REET			
CITY: ST. LOUIS			STATE: MO	ZIP: 63102
EMAIL:		ATTENDANCE:	SUBMIT I 1/26/20	DATE: 121 12:00 AM
THE INFORMA	TION ON THIS FORI	M IS PUBLIC RECOR	D UNDER CHA	PTER 610, RSMo.



BILL NUMBER: HB 75				DATE: 1/26/2021
COMMITTEE: Special Committee	e on Small Business			
TESTIFYING:	☑IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
BUSINESS/ORG	ANIZATION:			
WITNESS NAME: RICHARD A. MARS	SHALL		PHONE NUME 314-568-9	
BUSINESS/ORGANIZATION RICHARD A. MARS	ON NAME: SHALL ELECTRIC INC	ORPORATED	TITLE: PRESIDEI	NT
ADDRESS: 3116 IVANHOE AVENUE				
CITY: ST. LOUIS			STATE: MO	ZIP: 63139
EMAIL:		ATTENDANCE:	SUBMIT I 1/26/20	DATE: 12:00 AM
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECOR	D UNDER CHA	PTER 610. RSMo.



BILL NUMBER: HB 75				DATE: 1/26/2021		
COMMITTEE: Special Committe	COMMITTEE: Special Committee on Small Business					
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSE	S	
		WITNESS NAME				
INDIVIDUAL:						
WITNESS NAME: ROBERT L. FORD	IV "BOBBY FORD"		PHONE NUM	BER:		
BUSINESS/ORGANIZATIO	ON NAME:		TITLE:			
ADDRESS:			·			
CITY:			STATE:	ZIP:		
EMAIL:		ATTENDANCE:	SUBMIT 1/26/20	DATE:)21 12:00 AM		
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECOR	D UNDER CHA	PTER 610. RSMc) .	



BILL NUMBER: HB 75				DATE: 1/26/2021
COMMITTEE: Special Committee	e on Small Business		•	
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: SARAH REAGAN			PHONE NUMB	ER:
BUSINESS/ORGANIZATIO	DN NAME:		TITLE:	
ADDRESS:				
CITY:			STATE:	ZIP:
EMAIL:		ATTENDANCE:	SUBMIT D 1/26/20	OATE: 21 12:00 AM
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECOR	UNDER CHA	PTER 610. RSMo.



BILL NUMBER: HB 75				DATE: 1/26/2021
COMMITTEE: Special Committee	e on Small Business		·	
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: SHANNON ROBIN	SON		PHONE NUME	BER:
BUSINESS/ORGANIZATIO	ON NAME:		TITLE:	
ADDRESS:			·	
CITY:			STATE:	ZIP:
EMAIL:		ATTENDANCE:	SUBMIT D 1/26/20	OATE: 21 12:00 AM
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECOR	D UNDER CHA	PTER 610. RSMo.



BILL NUMBER: HB 75				DATE: 1/26/2021
COMMITTEE: Special Committee on Sr	mall Business			
TESTIFYING:	SUPPORT OF	☐ IN OPPOSITION TO		ATIONAL PURPOSES
		WITNESS NAME		
BUSINESS/ORGANIZ	ATION:			
WITNESS NAME: STEPHEN J SAVAGE			PHONE NUME 314-640-0	
BUSINESS/ORGANIZATION NAME WHEELHOUSE, START B		RN	TITLE: OWNER	
ADDRESS: 1000 SPRUCE STREET				
CITY: ST. LOUIS			STATE: MO	ZIP: 63102
EMAIL:		ATTENDANCE:	SUBMIT 0 1/26/20	DATE: 121 12:00 AM
THE INFORMATION	ON THIS FORI	M IS PUBLIC RECOR	D UNDER CHA	PTER 610. RSMo.



BILL NUMBER: HB 75				DATE: 1/26/2021
COMMITTEE: Special Committee	e on Small Business		·	
TESTIFYING:	☑IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORMA	TIONAL PURPOSES
		WITNESS NAME		
BUSINESS/ORG	ANIZATION:			
WITNESS NAME: STEVE STEGALL			PHONE NUMBE 816-977-85	
BUSINESS/ORGANIZATION THE BLUE LINE H			TITLE: OWNER	
ADDRESS: 529 WALNUT STR	EET			
CITY: KANSAS CITY			STATE: MO	ZIP: 64106
EMAIL:		ATTENDANCE:	SUBMIT DA 1/26/202	ATE: 21 12:00 AM
THE INFORMA	TION ON THIS FORM	I IS PUBLIC RECOR	D UNDER CHAP	PTER 610, RSMo.



BILL NUMBER: HB 75				DATE: 1/26/2021
COMMITTEE: Special Committee	e on Small Business			
TESTIFYING:	☑IN SUPPORT OF	☐ IN OPPOSITION TO		ATIONAL PURPOSES
		WITNESS NAME		
BUSINESS/ORG	ANIZATION:			
WITNESS NAME: STEVEN COOK			PHONE NUME 314-939-1	
BUSINESS/ORGANIZATION KT'S SALOON	DN NAME:		TITLE: OWNER	
ADDRESS: 4574 TELEGRAPH	ROAD			
CITY: ST. LOUIS			STATE: MO	ZIP: 63129
EMAIL:		ATTENDANCE:	SUBMIT 0 1/26/20	DATE: 121 12:00 AM
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECOR	D UNDER CHA	PTER 610. RSMo.



BILL NUMBER: HB 75				DAT 1/2	TE: 26/2021
COMMITTEE: Special Committee	e on Small Business			•	
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFO	RMATIC	NAL PURPOSES
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: STEVEN KELLER			PHONE N	UMBER:	
BUSINESS/ORGANIZATIO	DN NAME:		TITLE:		
ADDRESS:					
CITY:			STATE:		ZIP:
EMAIL:		ATTENDANCE:	SUBN 1/26	MIT DATE: 5/2021 1	2:00 AM
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECOR	D UNDER CI	HAPTE	R 610. RSMo.



BILL NUMBER: HB 75				DATE: 1/26/2021
COMMITTEE: Special Committee	e on Small Business		·	
TESTIFYING:	☑IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: SUMMER PRATT			PHONE NUMB	BER:
BUSINESS/ORGANIZATIO	ON NAME:		TITLE:	
ADDRESS:			·	
CITY:			STATE:	ZIP:
EMAIL:		ATTENDANCE:	SUBMIT D 1/26/20	OATE: 21 12:00 AM
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECORI	D UNDER CHA	PTER 610. RSMo.



BILL NUMBER: HB 75				DATE: 1/26/2021
COMMITTEE: Special Committee	e on Small Business			
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: TAYLOR M. RAY			PHONE NUME	BER:
BUSINESS/ORGANIZATION	ON NAME:		TITLE:	
ADDRESS:			•	
CITY:			STATE:	ZIP:
EMAIL:		ATTENDANCE:	SUBMIT I 1/26/20	DATE: 121 12:00 AM
THE INFORMA	TION ON THIS FORM	I IS PUBLIC RECORD	UNDER CHA	PTER 610. RSMo.



BILL NUMBER: HB 75				DATE: 1/26/2021
COMMITTEE: Special Committee	e on Small Business			
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: TRICIA M MILLIKA	AN		PHONE NUME	BER:
BUSINESS/ORGANIZATION	ON NAME:		TITLE:	
ADDRESS:				
CITY:			STATE:	ZIP:
EMAIL:		ATTENDANCE:	SUBMIT I 1/26/20	DATE: 021 12:00 AM
THE INFORMA	TION ON THIS FORI	M IS PUBLIC RECORD	UNDER CHA	PTER 610, RSMo.



BILL NUMBER: HB 75				DA1 1/2	re: 26/2021
COMMITTEE: Special Committe	e on Small Business			·	
TESTIFYING:	✓ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFO	RMATIC	NAL PURPOSES
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: TROY OLLAR			PHONE N	IUMBER:	
BUSINESS/ORGANIZATION	ON NAME:		TITLE:		
ADDRESS:					
CITY:			STATE:		ZIP:
EMAIL:		ATTENDANCE:	SUBI 1/26	MIT DATE: 6/2021 1	2:00 AM
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECOR	D UNDER C	HAPTE	R 610. RSMo.



BILL NUMBER: HB 75				DATE: 1/26/2021		
COMMITTEE: Special Committee	COMMITTEE: Special Committee on Small Business					
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES		
		WITNESS NAME				
INDIVIDUAL:						
WITNESS NAME: TYLER ADOLPHS	ON		PHONE NUMB	BER:		
BUSINESS/ORGANIZATIO	ON NAME:		TITLE:			
ADDRESS:			·			
CITY:			STATE:	ZIP:		
EMAIL:		ATTENDANCE:	SUBMIT D 1/26/20	OATE: 21 12:00 AM		
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECORI	D UNDER CHA	PTER 610. RSMo.		



BILL NUMBER: HB 75				DATE: 1/26/2021	
COMMITTEE: Special Committee on Small Business					
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	IATIONAL PURPOSE	ES
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: WHITNEY BANKE	R		PHONE NUM	BER:	
BUSINESS/ORGANIZATIO	ON NAME:		TITLE:		
ADDRESS:			·		
CITY:			STATE:	ZIP:	
EMAIL:		ATTENDANCE:	SUBMIT 1/26/20	DATE:)21 12:00 AM	
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECOR	D UNDER CHA	PTER 610. RSMc) .



BILL NUMBER: HB 75				DA'	TE: 2 6/2021
COMMITTEE: Special Committe	e on Small Business			•	
TESTIFYING:	✓ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR IN	IFORMATIC	NAL PURPOSES
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: WILLIAM JOHN P	IZZITOLA		PHC	NE NUMBER:	
BUSINESS/ORGANIZATION	ON NAME:		TITL	E:	
ADDRESS:					
CITY:			STA	TE:	ZIP:
EMAIL:		ATTENDANCE:		SUBMIT DATE: 1/26/2021 1	2:00 AM
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECOR	D UNDER	R CHAPTE	R 610. RSMo.



BILL NUMBER: HB 75				DAT 1/2	E: 6/2021
COMMITTEE: Special Committe	e on Small Business			·	
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INF	ORMATIO	NAL PURPOSES
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: ZACH CONLEY			PHONE	E NUMBER:	
BUSINESS/ORGANIZATION	ON NAME:		TITLE:		
ADDRESS:			·		
CITY:			STATE	:	ZIP:
EMAIL:		ATTENDANCE:		JBMIT DATE: 26/2021 12	2:00 AM
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECOR	D UNDER	CHAPTE	R 610. RSMo.



BILL NUMBER: HB 75				DATE: 1/26/2021
COMMITTEE: Special Committe	e on Small Business			
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	MATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: ZACH HAYES			PHONE NUM	MBER:
BUSINESS/ORGANIZATION	ON NAME:		TITLE:	
ADDRESS:			·	
CITY:			STATE:	ZIP:
EMAIL:		ATTENDANCE:	SUBMIT 1/26/2	DATE: 021 12:00 AM
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECOR	D UNDER CH	APTER 610. RSMo.



BILL NUMBER: HB 75				DATE: 1/26/2021
COMMITTEE: Special Committe	e on Small Business			
TESTIFYING:	☐ IN SUPPORT OF	☑ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
BUSINESS/ORG	ANIZATION:			
WITNESS NAME: CLAY GODDARD			PHONE NUMB 417-869-1	
BUSINESS/ORGANIZATION NAME: MISSOURI CENTER FOR PUBLIC HEALTH EXCELLENCE			TITLE: IMMEDIA	TE PAST PRESIDENT
ADDRESS: 227 EAST CHESTNUT EXPRESSWAY				
CITY: SPRINGFIELD			STATE: MO	ZIP: 65802
EMAIL:		ATTENDANCE:	SUBMIT I 1/26/20	DATE: 021 12:00 AM
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECOR	D UNDER CHA	PTFR 610 RSMo



BILL NUMBER: HB 75				DATE: 1/26/2021
COMMITTEE: Special Committee	e on Small Business			
TESTIFYING:	☐ IN SUPPORT OF	✓ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
BUSINESS/ORG	ANIZATION:			
WITNESS NAME: GEORGANNE SYL	.ER		PHONE NUMI 573-335-7	
BUSINESS/ORGANIZATION NAME: CAPE GIRARDEAU COUNTY PUBLIC HEALTH CENTER			BOARD C	F TRUSTEES, VICE
ADDRESS: 1121 LINDEN				
CAPE GIRARDEA	U		STATE: MO	ZIP: 63702
EMAIL:		ATTENDANCE:	SUBMIT I 1/26/20	DATE:)21 12:00 AM
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECOR	D LINDER CHA	PTER 610 RSMo



BILL NUMBER: HB 75				DATE: 1/26/2021
COMMITTEE: Special Committee	e on Small Business			
TESTIFYING:	☐ IN SUPPORT OF	☑ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
BUSINESS/ORG	ANIZATION:			
WITNESS NAME: MIKE HERBERT			PHONE NUME 573-369-2	
BUSINESS/ORGANIZATION NAME: MISSOURI ASSOCIATION OF LOCAL PUBLIC HEALTH AGENCY			TITLE: ADMINIST	RATOR
ADDRESS: 2125 HIGHWAY 52				
CITY: TUSCUMBIA			STATE: MO	ZIP: 65080
EMAIL:		ATTENDANCE:	SUBMIT I 1/26/20	DATE: 021 12:00 AM
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECOR	D UNDER CHA	PTER 610. RSMo.



BILL NUMBER: HB 75				DATE: 1/26/2021
COMMITTEE: Special Committee	e on Small Business			
TESTIFYING:	\square IN SUPPORT OF	✓ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
BUSINESS/ORG	ANIZATION:			
WITNESS NAME: MIKE HERBERT			PHONE NUME 573-369-2	
BUSINESS/ORGANIZATION MILLER COUNTY			TITLE:	
ADDRESS: 2125 HIGHWAY 52				
CITY: TUSCUMBIA			STATE: MO	ZIP: 65080
EMAIL:		ATTENDANCE:	SUBMIT 0 1/26/20	DATE: 121 12:00 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.				



BILL NUMBER: HB 75				DATE: 1/26/2021
COMMITTEE: Special Committee	e on Small Business			
TESTIFYING:	☐ IN SUPPORT OF	✓ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
BUSINESS/ORG	ANIZATION:			
WITNESS NAME: SARAH MICHAEL:	S, DO		PHONE NUMI 573-635-0	
BUSINESS/ORGANIZATION MISSOURI ACADE	ON NAME: EMY OF FAMILY PHYSI	CIANS	TITLE: MEMBER	
ADDRESS: 722 WEST HIGH STREET				
CITY: JEFFERSON CITY	,		STATE: MO	ZIP: 65101
EMAIL:		ATTENDANCE:	SUBMIT I 1/26/20	DATE: 021 12:00 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.				



BILL NUMBER: HB 75			DATE: 1/26/2021	
COMMITTEE: Special Committee on Small Business				
TESTIFYING: IN SUPPORT OF	✓ IN OPPOSITION TO	FOR INFORMA	ATIONAL PURPOSES	
	WITNESS NAME			
REGISTERED LOBBYIST:				
WITNESS NAME: SHANTEL DOOLING		PHONE NUMB 573-353-38		
REPRESENTING: TITLE: MISSOURI STATE MEDICAL ASSOCIATION				
ADDRESS: 113 MADISON STREET				
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101	
EMAIL:	ATTENDANCE:	SUBMIT D. 1/26/202	ATE: 21 12:00 AM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.				



BILL NUMBER: HB 75			DATE: 1/26/2021	
COMMITTEE: Special Committee on Small Business				
TESTIFYING: □IN SUPPORT OF	▼ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES	
	WITNESS NAME			
BUSINESS/ORGANIZATION:				
WITNESS NAME: TODD SHAFFER, MD		PHONE NUME 573-635-0		
BUSINESS/ORGANIZATION NAME: MISSOURI ACADEMY OF FAMILY PHYS	ICIANS	TITLE: PAST PRI	ESIDENT	
ADDRESS: 722 WEST HIGH STREET				
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101	
EMAIL:	ATTENDANCE:	SUBMIT I 1/26/20	DATE: 021 12:00 AM	
THE INFORMATION ON THIS FOR	RM IS PUBLIC RECOR	D UNDER CHA	PTER 610. RSMo.	



BILL NUMBER: HB 75					ATE: /26/2021
COMMITTEE: Special Committe	e on Small Business			•	
TESTIFYING:	☐ IN SUPPORT OF	☐ IN OPPOSITION TO	✓FOR	INFORMATI	ONAL PURPOSES
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: BRIANNA M. JAC	KSON		PH	HONE NUMBER:	
BUSINESS/ORGANIZATION	ON NAME:		TI	TLE:	
ADDRESS:					
CITY:			ST	TATE:	ZIP:
EMAIL:		ATTENDANCE:		SUBMIT DATE 1/26/2021	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610. RSMo.					



BILL NUMBER: HB 75				DATE: 1/26/2021
COMMITTEE: Special Committe	e on Small Business			
TESTIFYING:	☐IN SUPPORT OF	☐ IN OPPOSITION TO	FOR INFORM	MATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: MOON STREITZ			PHONE NUM	MBER:
BUSINESS/ORGANIZATION	ON NAME:		TITLE:	
ADDRESS:			·	
CITY:			STATE:	ZIP:
EMAIL:		ATTENDANCE:	SUBMIT 1/26/2	DATE: 1021 12:00 AM
THE INFORMA	TION ON THIS FOR	M IS PUBLIC RECOR	D UNDER CH	APTER 610. RSMo.



BILL NUMBER: HB 75				DATE: 1/26/2021
COMMITTEE: Special Committee	on Small Business		·	
TESTIFYING:	\square IN SUPPORT OF	☐ IN OPPOSITION TO	FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
REGISTERED LO	BBYIST:			
WITNESS NAME: OTTO FAJEN			PHONE NUMB 573-634-3 2	
REPRESENTING: MISSOURI NATION	AL EDUCATION ASSO	OCIATION	TITLE:	
ADDRESS: 1810 EAST ELM STREET				
CITY: JEFFERSON CITY			STATE: MO	ZIP: 65101
EMAIL:		ATTENDANCE:	SUBMIT D 1/26/20	OATE: 21 12:00 AM
THE INFORMAT	ION ON THIS FOR	M IS PUBLIC RECOR	D UNDER CHA	PTER 610, RSMo.