



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: SB 289 | | DATE: 4/19/2021 | |
| COMMITTEE: Special Committee on Government Accountability | | | |
| 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. "HONEST-ABE" DIENOFF-STATE PUBLIC ADVOCAT | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: arniedienoff@yahoo.com | ATTENDANCE: Written | | SUBMIT DATE: 4/19/2021 3:06 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |

I am in Support of this Bill. There NEEDS to be an Amendment that the Record of who the License-Officer was in the past and is Employed by what Agency, Shall be Open to the Public and a matter of Public Record.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------|--|----------------------|
| BILL NUMBER: SB 289 | | DATE: 4/19/2021 | |
| COMMITTEE: Special Committee on Government Accountability | | | |
| TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES | | | |
| WITNESS NAME | | | |
| BUSINESS/ORGANIZATION: | | | |
| WITNESS NAME: COLLIN STOSBERG | | PHONE NUMBER: 816-853-2143 | |
| BUSINESS/ORGANIZATION NAME: MISSOURI STATE HIGHWAY PATROL | | TITLE: LIEUTENANT, LEGISLATIVE LIAISON | |
| ADDRESS: 1510 EAST ELM STREET | | | |
| CITY: JEFFERSON CITY | | STATE: MO | ZIP: 65101 |
| EMAIL: | ATTENDANCE: | SUBMIT DATE: 4/19/2021 12:00 AM | |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|--------------------------------------|---|
| BILL NUMBER: SB 289 | | DATE: 4/19/2021 | |
| COMMITTEE: Special Committee on Government Accountability | | | |
| TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES | | | |
| WITNESS NAME | | | |
| BUSINESS/ORGANIZATION: | | | |
| WITNESS NAME: KEVIN MERRITT | | PHONE NUMBER: 573-301-7728 | |
| BUSINESS/ORGANIZATION NAME: MISSOURI SHERIFFS' ASSOCIATION; MISSOURI SHERIFFS UNITED | | TITLE: EXECUTIVE DIRECTOR | |
| ADDRESS: 6605 BUSINESS 50 WEST | | | |
| CITY: JEFFERSON CITY | | STATE: MO | ZIP: 65109 |
| EMAIL: kevin@mosheriffsunited.com | ATTENDANCE: Written | | SUBMIT DATE: 4/19/2021 10:39 AM |

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

We support well thought out, common sense police reform. Requiring fingerprinting and enrollment in the Rap Back Program is a step toward ensuring law enforcement employers become aware of inappropriate conduct by officers and further the mission to get rid of bad cops.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|--|----------------------|
| BILL NUMBER: SB 289 | | DATE: 4/19/2021 | |
| COMMITTEE: Special Committee on Government Accountability | | | |
| TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES | | | |
| WITNESS NAME | | | |
| REGISTERED LOBBYIST: | | | |
| WITNESS NAME: MARK BRUNS | | PHONE NUMBER: 573-690-0342 | |
| REPRESENTING: MISSOURI FRATERNAL ORDER OF POLICE; ST. LOUIS POLICE OFFICERS ASSOCIATION; KANSAS CITY FRATERNAL ORDER OF POLICE | | TITLE: | |
| ADDRESS: 715 JEFFERSON STREET | | | |
| CITY: JEFFERSON CITY | | STATE: MO | ZIP: 65101 |
| EMAIL: mark@brunslobby.com | ATTENDANCE: Written | SUBMIT DATE: 4/19/2021 5:07 PM | |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |
| The Missouri FOP, St. Louis Police Officers Association and Kansas City FOP supports SB289. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------|---|----------------------|
| BILL NUMBER: SB 289 | | DATE: 4/19/2021 | |
| COMMITTEE: Special Committee on Government Accountability | | | |
| TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES | | | |
| WITNESS NAME | | | |
| REGISTERED LOBBYIST: | | | |
| WITNESS NAME: SARA BAKER | | PHONE NUMBER: | |
| REPRESENTING: AMERICAN CIVIL LIBERTIES UNION OF MISSOURI | | TITLE: | |
| ADDRESS: 906 OLIVE STREET #1130 | | | |
| CITY: SAINT LOUIS | | STATE: MO | ZIP: 63101 |
| EMAIL: | ATTENDANCE: | SUBMIT DATE: 4/19/2021 12:00 AM | |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|--------------------------------------|--|
| BILL NUMBER: SB 289 | | DATE: 4/19/2021 | |
| COMMITTEE: Special Committee on Government Accountability | | | |
| TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES | | | |
| WITNESS NAME | | | |
| REGISTERED LOBBYIST: | | | |
| WITNESS NAME: SHARON JONES | | PHONE NUMBER: 573-808-2156 | |
| REPRESENTING: NAACP | | TITLE: | |
| ADDRESS: 311 DUNKLIN | | | |
| CITY: JEFFERSON CITY | | STATE: MO | ZIP: 65101 |
| EMAIL: sharon@jonesadvocacy.com | ATTENDANCE: Written | | SUBMIT DATE: 4/19/2021 8:56 PM |

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

Increasing accountability is the best way to start to build trust between law enforcement agents and the people they are commissioned to serve. This bill is a good step in the right direction.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|---------------------------------|--|----------------------|
| BILL NUMBER: SB 289 | | DATE: 4/19/2021 | |
| COMMITTEE: Special Committee on Government Accountability | | | |
| TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES | | | |
| WITNESS NAME | | | |
| BUSINESS/ORGANIZATION: | | | |
| WITNESS NAME: TYLER HOBBS | | PHONE NUMBER: 573-508-2465 | |
| BUSINESS/ORGANIZATION NAME: STATE OF MISSOURI DEPARTMENT OF PUBLIC SAFETY | | TITLE: LEGISLATIVE DIRECTOR | |
| ADDRESS: 1101 RIVERSIDE DRIVE | | | |
| CITY: JEFFERSON CITY | | STATE: MO | ZIP: 65101 |
| EMAIL: tyler.hobbs@dps.mo.gov | ATTENDANCE: In-Person | SUBMIT DATE: 4/19/2021 5:06 PM | |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |