



MISSOURI HOUSE OF REPRESENTATIVES  
**WITNESS APPEARANCE FORM**

BILL NUMBER: <b>HB 1028</b>		DATE: <b>3/1/2023</b>	
COMMITTEE: <b>Corrections and Public Institutions</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>ANGELA QUICK</b>		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL:	ATTENDANCE:		SUBMIT DATE: <b>3/1/2023 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>GREGORY SMITH</b>		PHONE NUMBER: <b>816-832-7546</b>	
REPRESENTING: <b>MO COALITON OF RECOVERY SUPPORT PROVIDERS</b>		TITLE: <b>LOBBYIST</b>	
ADDRESS: <b>1305 SOUTHWEST BLVD SUITE D</b>			
CITY: <b>JEFFERSON CITY</b>		STATE: <b>MO</b>	ZIP: <b>65109</b>
EMAIL:	ATTENDANCE:	SUBMIT DATE: <b>3/1/2023 12:00 AM</b>	
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<b>WITNESS NAME</b>			
<b>BUSINESS/ORGANIZATION:</b>			
WITNESS NAME: <b>GWEN SMITH</b>		PHONE NUMBER: <b>314-324-9656</b>	
BUSINESS/ORGANIZATION NAME: <b>EMPOWER MISSOURI</b>		TITLE: <b>CRIMINAL JUSTICE POLICY MANAGER</b>	
ADDRESS:			
CITY: <b>ST. LOUIS</b>		STATE: <b>MO</b>	ZIP: <b>63116</b>
EMAIL: <b>gwen@empowermissouri.org</b>	ATTENDANCE: <b>Written</b>		SUBMIT DATE: <b>3/1/2023 3:54 PM</b>
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As the largest and oldest anti-poverty non-profit in our state, Empower Missouri is committed to improving the quality of life for all Missouri residents through advocacy. Since our inception, Empower Missouri has focused on the criminal justice system and its impacts. Our Community Justice Coalition consists of community advocates and organizations from across the state who work with those who have been impacted by the criminal justice system. Many coalition members are formerly incarcerated or have currently incarcerated loved ones, and all are connected by a vision for a future without mass incarceration. We are providing testimony today in support of HB 1028, sponsored by Representative Travis Smith, which would authorize a tax credit for donations made to organizations that promote recovery and address substance abuse. HB 1028 would incentivize Missouri taxpayers to support those organizations working towards solutions for the epidemic of substance abuse in our state. Substance abuse is the root cause of many individuals' contact with the criminal justice system and subsequent incarceration. Drug overdoses are the number one leading cause of death among adults aged 18-44 in Missouri. In 2021, 1 in every 47 deaths in the state was attributable to an opioid-involved overdose.\* This puts a huge strain on families, communities, and healthcare systems. The drug epidemic affects all genders, races, and many age groups in rural and urban Missouri communities. By passing HB 1028, Missouri would take a meaningful step forward in addressing this public health crisis. Empower Missouri urges this committee to take action to pass HB 1028 into law. Thank you for your time and consideration of this matter.\*Drug overdose dashboard - fatal overdoses. Missouri Department of Health Senior Services. Retrieved February 28, 2023, from <https://health.mo.gov/data/opioids/>



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<b>WITNESS NAME</b>			
<b>INDIVIDUAL:</b>			
WITNESS NAME: <b>JAMES FIELDS</b>		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL:	ATTENDANCE:		SUBMIT DATE: <b>3/1/2023 12:00 AM</b>
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<b>WITNESS NAME</b>			
<b>INDIVIDUAL:</b>			
WITNESS NAME: <b>JENNIFER OSBORN</b>		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL:	ATTENDANCE:		SUBMIT DATE: <b>3/1/2023 12:00 AM</b>
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<b>WITNESS NAME</b>			
<b>INDIVIDUAL:</b>			
WITNESS NAME: <b>JOYCE FIELDS</b>		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL:	ATTENDANCE:		SUBMIT DATE: <b>3/1/2023 12:00 AM</b>
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<b>WITNESS NAME</b>			
<b>INDIVIDUAL:</b>			
WITNESS NAME: <b>LAWRENCE WALKER</b>		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL:	ATTENDANCE:		SUBMIT DATE: <b>3/1/2023 12:00 AM</b>
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<b>WITNESS NAME</b>			
<b>BUSINESS/ORGANIZATION:</b>			
WITNESS NAME: <b>MARSHA HAWKINGS-HOURD</b>		PHONE NUMBER: <b>314-662-0953</b>	
BUSINESS/ORGANIZATION NAME: <b>CHILD AND FAMILY EMPOWERMENT CENTER</b>		TITLE: <b>EXECUTIVE DIRECTOR</b>	
ADDRESS: <b>4145 KENNERLY AVE</b>			
CITY: <b>ST LOUIS</b>		STATE: <b>MO</b>	ZIP: <b>63113</b>
EMAIL:	ATTENDANCE:	SUBMIT DATE: <b>3/1/2023 12:00 AM</b>	
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<b>WITNESS NAME</b>			
<b>INDIVIDUAL:</b>			
WITNESS NAME: <b>REBECCA SCHUESSLER</b>		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
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<b>WITNESS NAME</b>			
<b>INDIVIDUAL:</b>			
WITNESS NAME: <b>ARNIE C."HONEST-ABE" DIENOFF-STATE PUBLIC ADVOCATE</b>		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: <b>arniedienoff@yahoo.com</b>	ATTENDANCE: <b>Written</b>		SUBMIT DATE: <b>3/1/2023 11:58 PM</b>
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<b>I am Opposed to this Bill. No more Tax-Credits!</b>			



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<b>WITNESS NAME</b>			
<b>INDIVIDUAL:</b>			
WITNESS NAME: <b>MARY HARRIS</b>		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: <b>msrenee1111@yahoo.com</b>	ATTENDANCE: <b>Written</b>		SUBMIT DATE: <b>3/1/2023 4:02 PM</b>
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