

## MISSOURI HOUSE OF REPRESENTATIVES WITNESS APPEARANCE FORM

BILL NUMBER: HB 338				DATE 4/12	: 2/2023		
COMMITTEE: Government Efficiency and Downsizing							
TESTIFYING:	✓ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFOR	MATION	NAL PURPOSES		
WITNESS NAME							
INDIVIDUAL:							
WITNESS NAME: CLIFF J WILKINSON			PHONE NU	PHONE NUMBER:			
BUSINESS/ORGANIZATION NAME:			TITLE:	TITLE:			
ADDRESS:							
CITY:			STATE:		ZIP:		
EMAIL: cliffjwilkinson@gi	mail.com	ATTENDANCE: Written		SUBMIT DATE: 4/12/2023 5:27 AM			
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.							



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		WITNESS NAME				
INDIVIDUAL:						
WITNESS NAME: ARNIE C."HONEST-ABE" DIENOFF-STATE PUBLIC ADVOCATE			PHONE NUMB	PHONE NUMBER:		
BUSINESS/ORGANIZATION NAME:			TITLE:	TITLE:		
ADDRESS:						
CITY:			STATE:	ZIP:		
EMAIL: arniedienoff@yah	oo.com	ATTENDANCE: Written	SUBMIT DATE: 4/12/2023 11:40 PM			
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I am Opposed to this Bill in its present form.



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TESTIFYING:	☐ IN SUPPORT OF	✓ IN OPPOSITION TO	☐FOR INFORM	IATIONAL PURPOSES			
WITNESS NAME							
INDIVIDUAL:							
WITNESS NAME: PHON SUSAN GIBSON			PHONE NUM	ONE NUMBER:			
BUSINESS/ORGANIZATION NAME:			TITLE:	TITLE:			
ADDRESS:							
CITY:			STATE:	ZIP:			
EMAIL: Onesuegibson@p	rotonmail.com	ATTENDANCE: Written	SUBMIT 4/8/202	DATE: <b>23 2:21 PM</b>			
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No need to punitively starve people and their families.