



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 594		DATE: 3/28/2023	
COMMITTEE: Children and Families			
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: BRENT HEMPHILL		PHONE NUMBER:	
REPRESENTING: MISSOURI AMBULANCE ASSOCIATION		TITLE:	
ADDRESS: PO BOX 156			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/28/2023 12:00 AM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			



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WITNESS NAME		
REGISTERED LOBBYIST:		
WITNESS NAME: JUSTIN ALFERMAN		PHONE NUMBER: 636-667-1093
REPRESENTING: SSM HEALTH		TITLE:
ADDRESS: 10101 WOODFIELD		
CITY: ST. LOUIS		STATE: MO
		ZIP: 63132
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/28/2023 12:00 AM
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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: PATRICIA CASEY		PHONE NUMBER: 314-422-6583	
BUSINESS/ORGANIZATION NAME: CARDINAL GLENNON CHILDREN'S HOSPITAL		TITLE: PARAMEDIC - RN	
ADDRESS: GRAND AVENUE			
CITY: ST. LOUIS		STATE: MO	ZIP: 63011
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/28/2023 12:00 AM	
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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: SAMUEL LEE		PHONE NUMBER: 314-368-4242	
REPRESENTING: CAMPAIGN LIFE MISSOURI		TITLE:	
ADDRESS: PO BOX 142585			
CITY: ST. LOUIS		STATE: MO	ZIP: 63114
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/28/2023 12:00 AM	
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WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: ARNIE C. "HONEST-ABE" DIENOFF-STATE PUBLIC ADVOCATE		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: arniedienoff@yahoo.com	ATTENDANCE: Written	SUBMIT DATE: 3/28/2023 7:58 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I am highly Opposed to this Bill. Children under the Age of 18 do not have the mind capacity to make these adult and life result issues or decisions. I believe in life at all cost and this is an "Anti-Life Bill." Vote and Defeat this awful Bill. Support Life!



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INDIVIDUAL:			
WITNESS NAME: ARNIE C. "HONEST-ABE" DIENOFF-STATE PUBLIC ADVOCATE		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: arniedienoff@yahoo.com	ATTENDANCE: Written		SUBMIT DATE: 3/21/2023 11:04 PM
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I am Opposed to this Bill and it's intent. Children under 18-Can NOT decide nor have the capacity to decide for themselves. This is a wrong bill and goes against the Sanctity of Life and Value of Life. Defeat this Bill in it's tracks!