



MISSOURI HOUSE OF REPRESENTATIVES  
**WITNESS APPEARANCE FORM**

BILL NUMBER: <b>HB 924</b>		DATE: <b>4/20/2023</b>	
COMMITTEE: <b>Crime Prevention and Public Safety</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>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>4/20/2023 11:39 PM</b>
<b>THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.</b>			

**I am in Support of this Bill and its Intension. Emergency Communications Call-Takers and Dispatchers NEED to have more Training and Education.**



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<b>WITNESS NAME</b>		
<b>REGISTERED LOBBYIST:</b>		
WITNESS NAME: <b>J TRENT FORD</b>		PHONE NUMBER: <b>314-409-6812</b>
REPRESENTING: <b>AMBULANCE DISTRICT ASSOCIATION OF MO</b>		TITLE:
ADDRESS: <b>PO BOX 368</b>		
CITY: <b>COLUMBIA</b>		STATE: <b>MO</b>
		ZIP: <b>65205</b>
EMAIL: <b>jtrent4d@gmail.com</b>	ATTENDANCE: <b>Written</b>	SUBMIT DATE: <b>4/19/2023 10:32 AM</b>
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<b>WITNESS NAME</b>		
<b>INDIVIDUAL:</b>		
WITNESS NAME: <b>JAN ORDOYNE</b>		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE:                  ZIP:
EMAIL: <b>myhighernature@yahoo.com</b>	ATTENDANCE: <b>Written</b>	SUBMIT DATE: <b>4/18/2023 5:35 PM</b>
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<b>WITNESS NAME</b>		
<b>REGISTERED LOBBYIST:</b>		
WITNESS NAME: <b>KAYCEE NAIL</b>		PHONE NUMBER: <b>314-630-5709</b>
REPRESENTING: <b>MO 911 SERVICE BOARD; MO-APCO; MO CHAPTER - NATIONAL EMERGENCY NUMBER ASSOCIATION; MO 911 DIRECTORS ASSOCIATION</b>		TITLE:
ADDRESS: <b>PO BOX 684</b>		
CITY: <b>JEFFERSON CITY</b>		STATE: <b>MO</b>
		ZIP: <b>65102</b>
EMAIL: <b>kaycee@penman.group</b>	ATTENDANCE: <b>In-Person</b>	SUBMIT DATE: <b>4/20/2023 10:56 AM</b>
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<b>WITNESS NAME</b>		
<b>INDIVIDUAL:</b>		
WITNESS NAME: <b>MIKE MANIS</b>		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE:                  ZIP:
EMAIL: <b>mmanis@centurylink.net</b>	ATTENDANCE: <b>Written</b>	SUBMIT DATE: <b>4/19/2023 4:19 AM</b>
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**I am in favor of fire protection dues being collected by counties**



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<b>WITNESS NAME</b>			
<b>INDIVIDUAL:</b>			
WITNESS NAME: <b>RICHARD J. ORDOYNE</b>		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: <b>oper8rrick@yahoo.com</b>		ATTENDANCE: <b>Written</b>	SUBMIT DATE: <b>4/18/2023 6:37 PM</b>
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