

## MISSOURI HOUSE OF REPRESENTATIVES

## WITNESS APPEARANCE FORM

BILL NUMBER: SB 111				DATE: <b>3/30/2023</b>		
COMMITTEE: Administration and Accounts						
TESTIFYING: □	N SUPPORT OF	☐ IN OPPOSITION TO	☐ FOR INFORMATIONAL PURPOSES			
WITNESS NAME						
INDIVIDUAL:						
WITNESS NAME: ARNIE C."HONEST-ABE" DIENOFF-STATE PUBLIC ADVOCATE				PHONE NUMBER:		
BUSINESS/ORGANIZATION NAME:			TITLE:	TITLE:		
ADDRESS:						
CITY:			STATE:	ZIP:		
EMAIL: arniedienoff@yahoo.co	om	ATTENDANCE: Written	SUBMIT DATE: 3/30/2023 1:59 PM			
THE INFORMATION ON THIS FORM IS BIRLIC DECORD LINDER CHARTER 640, DSMo						

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

I Support this smart decision to offer Bi-Weekly Payments to State Employees, which will put more money in the pockets of State Employees that are the worst paid State Work Force in America. I am Opposed to the Appointment of the Director of Personnel by the Commission of State Administration. The Director of Personnel can be Removed for ANY reason. I have some Heart-Burn and Problems with that issue. Please Amend the Proposed Senate Bill 111.



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TESTIFYING:	☑IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES		
		WITNESS NAME				
BUSINESS/ORGANIZATION:						
WITNESS NAME: HANNAH SWANN			PHONE NUME <b>573-751-5</b>			
BUSINESS/ORGANIZATION NAME: MISSOURI OFFICE OF ADMINISTRATION			TITLE: LEGISLAT	TITLE: LEGISLATIVE DIRECTOR		
ADDRESS: STATE CAPITOL, ROOM 125						
CITY: JEFFERSON CITY			STATE: <b>MO</b>	ZIP: <b>65051</b>		
EMAIL:		ATTENDANCE:	SUBMIT DATE: 3/30/2023 12:00 AM			
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