



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: SB 129		DATE: 4/26/2023	
COMMITTEE: Judiciary			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
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: 4/26/2023 11:57 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

I am in Support of this Bill on its Face. The State, Court and Department of Revenue, Secretary of State or the Department of Professional Registration Shall as a last resort Suspend any ones License and Livelihood. This Power can be Misused and Abused!



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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: DR. JERRY HOBBS		PHONE NUMBER: 573-418-0988	
REPRESENTING: NATIONAL PARENTING ORGANIZATION		TITLE:	
ADDRESS: 548 SUNSET VIEW			
CITY: CAPE GIRARDEAU		STATE: MO	ZIP: 63701
EMAIL:	ATTENDANCE:	SUBMIT DATE: 4/26/2023 12:00 AM	
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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: JEFFREY A. J. MILLAR		PHONE NUMBER: 636-448-4982	
REPRESENTING: AMERICANS FOR EQUAL SHARED PARENTING		TITLE:	
ADDRESS: 4334-C ARROW TREE			
CITY: ST. LOUIS		STATE: MO	ZIP: 63128
EMAIL:	ATTENDANCE:	SUBMIT DATE: 4/26/2023 12:00 AM	

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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: TIMOTHY FABER		PHONE NUMBER: 573-480-2704	
REPRESENTING: MISSOURI BAPTIST CONVENTION		TITLE: DR.	
ADDRESS: 292 FAITH BLVD			
CITY: LAURIE		STATE: MO	ZIP: 65037
EMAIL: tfaber@mobaptist.org	ATTENDANCE: Written		SUBMIT DATE: 4/25/2023 10:32 PM

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We support both SB129 and SB35. Both are good bills and we would be happy with either or both being passed



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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: LAURA UNDERWOOD		PHONE NUMBER: 573-864-2824	
BUSINESS/ORGANIZATION NAME: MO ASSOCIATION OF FAMILY LAW ADVOCATES		TITLE: ATTORNEY	
ADDRESS: 300 B EAST HIGH ST			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101
EMAIL:	ATTENDANCE:	SUBMIT DATE: 4/26/2023 12:00 AM	
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