

BILL NUMBER: SCR 3				DATE: 4/5/2023	
COMMITTEE: Transportation Inf	rastructure				
TESTIFYING:	✓ IN SUPPORT OF	IN OPPOSITION TO		ATIONAL 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: ATTENDAN arniedienoff@yahoo.com Written		ATTENDANCE: Written		SUBMIT DATE: 4/5/2023 11:51 PM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.					
I am in Support of this Bill and its intension.					



BILL NUMBER: SCR 3				DA1 4/5	re: 5 /2023
COMMITTEE: Transportation Infrastructure					
TESTIFYING:	✓ IN SUPPORT OF	IN OPPOSITION TO		FORMATIC	NAL PURPOSES
		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: PHONE NUMBER: PHONE NUMBER:					
BUSINESS/ORGANIZATION NAME: TITLE:					
ADDRESS:					
CITY:			STAT	E:	ZIP:
EMAIL:		ATTENDANCE:		UBMIT DATE: 1/5/2023 12	:00 AM
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TESTIFYING:	✓ IN SUPPORT OF	IN OPPOSITION TO		RMATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: PHONE NUMBER: PHONE NUMBER:				JMBER:
BUSINESS/ORGANIZATION NAME: TITLE:				
ADDRESS:			l	
CITY:			STATE:	ZIP:
EMAIL: ATTENDANCE: SUBMIT DATE: 4/5/2023 12:00 AM				
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		WITNESS NAME				
REGISTERED LO	OBBYIST:					
WITNESS NAME: EDWARD (TONY) SHEPHERD				PHONE NUMBER: 636-240-5009		
REPRESENTING: TITLE: TITLE:						
ADDRESS: 201 MENNE RD						
CITY: OFALLON			STATE: MO	ZIP: 63366		
EMAIL: abatemo@yahoo.c	com	ATTENDANCE: In-Person	SUBMIT D 4/4/202	DATE: 3 11:41 PM		
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.						
A polite statement urging Law Enforcement and Motorcyclist to work together to eliminate profiling						

A polite statement urging Law Enforcement and Motorcyclist to work together to eliminate profili issues.



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TESTIFYING:	✓ IN SUPPORT OF	IN OPPOSITION TO		ATIONAL PURPOSES		
		WITNESS NAME				
BUSINESS/ORG	ANIZATION:					
WITNESS NAME: JOE WIDMER			PHONE NUME 816-536-7			
BUSINESS/ORGANIZATION NAME: FREEDOM OF ROAD RIDERS			TITLE: LEGISLAT			
ADDRESS: 2319 HEIDE LANE						
CITY: NAPOLEON			STATE: MO	ZIP: 64074		
EMAIL:		ATTENDANCE:		SUBMIT DATE: 4/5/2023 12:00 AM		
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