



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1550		DATE: 2/26/2024
COMMITTEE: Health and Mental Health Policy		
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: 2/26/2024 10:27 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I am in Support of this Bill and the Common-Sense approach of making sure that the water is pure, tested and approved for human consumption. ALL Missourians MUST be Protected and made safe with this and other industries.



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WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: KORTNIE HUDDLESTON		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: kortniehuddleston@gmail.com	ATTENDANCE: Written		SUBMIT DATE: 2/26/2024 6:49 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

I support this bill. We drink ice melt in our beverages every day and this water source should absolutely be from a source approved as drinking water. Please pass this bill, it is disgusting to think this is not already the case.



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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: LARON HILKE		PHONE NUMBER: 573-659-0787	
BUSINESS/ORGANIZATION NAME: HILKE's ICE COMPANY		TITLE:	
ADDRESS: 109 DOGWOOD			
CITY: FREEBURG		STATE: MO	ZIP: 65035
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/26/2024 12:00 AM	
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WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: MICHAEL DREYER		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: mdreyer93@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/26/2024 6:49 PM
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WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: WAYNE LEE		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL:	ATTENDANCE:		SUBMIT DATE: 2/26/2024 12:00 AM
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WITNESS NAME		
REGISTERED LOBBYIST:		
WITNESS NAME: RON LEONE		PHONE NUMBER: 573-864-5189
REPRESENTING: MPCA - MISSOURI PETROLEUM & CONVENIENCE ASSOCIATION		TITLE:
ADDRESS: 205 E. CAPITOL AVENUE		
CITY: JEFFERSON CITY		STATE: MO
		ZIP: 65101
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/26/2024 12:00 AM
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