



MISSOURI HOUSE OF REPRESENTATIVES  
**WITNESS APPEARANCE FORM**

BILL NUMBER: <b>HB 2136</b>		DATE: <b>2/20/2024</b>
COMMITTEE: <b>Elections and Elected Officials</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. AC "HONEST-ABE" DIENOFF STATE PUBLIC ADVO</b>		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE:                  ZIP:
EMAIL:	ATTENDANCE:	SUBMIT DATE: <b>2/20/2024 12:00 AM</b>
<b>THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.</b>		



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<b>WITNESS NAME</b>		
<b>INDIVIDUAL:</b>		
WITNESS NAME: <b>MICHAEL</b>		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE:                  ZIP:
EMAIL: <b>MichaelWesten.3up@protonmail.com</b>	ATTENDANCE: <b>Written</b>	SUBMIT DATE: <b>2/20/2024 1:42 PM</b>
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**I support HB 2136.**



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<b>WITNESS NAME</b>			
<b>BUSINESS/ORGANIZATION:</b>			
WITNESS NAME: <b>TRISH VINCENT</b>		PHONE NUMBER: <b>573-751-8731</b>	
BUSINESS/ORGANIZATION NAME: <b>MISSOURI SECRETARY OF STATE</b>		TITLE: <b>DEPUTY SECRETARY OF STATE/COS</b>	
ADDRESS: <b>600 WEST MAIN STREET</b>			
CITY: <b>JEFFERSON CITY</b>		STATE: <b>MO</b>	ZIP: <b>65101</b>
EMAIL:	ATTENDANCE:	SUBMIT DATE: <b>2/20/2024 12:00 AM</b>	
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