



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 2673		DATE: 4/24/2024	
COMMITTEE: Higher Education			
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: JOHN HUTCHINSON		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL:	ATTENDANCE:	SUBMIT DATE: 4/24/2024 12:00 AM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			



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WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: TOM STRONG		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL:	ATTENDANCE:	SUBMIT DATE: 4/24/2024 12:00 AM	
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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@mail.com	ATTENDANCE: Written	SUBMIT DATE: 4/24/2024 11:24 PM
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I am Opposed to this Bill and its intent to Limit Degrees and Post Graduate Work only by the University of Missouri, which will effect the Mission and Marking Statements of other State Public Universities and Colleges. The University of Missouri can NOT take on the additional educational responsibility work-load. Defeat this Bill!



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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: CHARLES R. BRAZEALE		PHONE NUMBER: 573-886-8929	
BUSINESS/ORGANIZATION NAME: UNIVERSITY OF MISSOURI FLAGSHIP COUNCIL		TITLE: CHAIR	
ADDRESS: PO BOX 14360			
CITY: PARIS		STATE: MO	ZIP: 65275
EMAIL: brazfarm100@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 4/24/2024 10:15 AM	

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The University of Missouri Flagship Council strongly supports the provision in current state statute that the University of Missouri shall be the state's only public research university and the exclusive grantor of research doctorates and first-professional degrees and will strongly oppose any attempt to repeal the provisions contained in current state statute (Section 172.280, Section 173.005 and Section 174.160).



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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: DUSTIN SCHNIEDERS		PHONE NUMBER: 573-680-1816	
REPRESENTING: UNIVERSITY OF MISSOURI SYSTEM		TITLE:	
ADDRESS: 217 E. CAPITOL AVE.			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65109
EMAIL:	ATTENDANCE:	SUBMIT DATE: 4/24/2024 12:00 AM	
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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: PAUL WAGNER		PHONE NUMBER: 573-529-7195	
REPRESENTING: COUNCIL ON PUBLIC HIGHER EDUCATION		TITLE:	
ADDRESS: 717 WESTPORT DRIVE			
CITY: COLUMBIA		STATE: MO	ZIP: 65203
EMAIL:	ATTENDANCE:	SUBMIT DATE: 4/24/2024 12:00 AM	
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