



MISSOURI HOUSE OF REPRESENTATIVES  
**WITNESS APPEARANCE FORM**

BILL NUMBER: <b>SB 1039</b>		DATE: <b>4/10/2024</b>	
COMMITTEE: <b>Special Committee on Innovation and Technology</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>REGISTERED LOBBYIST:</b>			
WITNESS NAME: <b>D. SCOTT PENMAN</b>		PHONE NUMBER: <b>573-343-8787</b>	
REPRESENTING: <b>MO 911 SERVICE BOARD; MO 911 DIRECTOR's ASSOCIATION; MO CHAPTER OF THE NATIONAL EMERGENCY NUMBER ASSOCIATION; MO-APCO</b>		TITLE:	
ADDRESS: <b>PO BOX 684</b>			
CITY: <b>JEFFERSON CITY</b>		STATE: <b>MO</b>	ZIP: <b>65102</b>
EMAIL: <b>scott@penman.group</b>	ATTENDANCE: <b>In-Person</b>	SUBMIT DATE: <b>4/10/2024 1:20 PM</b>	
<b>THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.</b>			



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<b>WITNESS NAME</b>			
<b>REGISTERED LOBBYIST:</b>			
WITNESS NAME: <b>PHILLIP ARNZEN</b>		PHONE NUMBER: <b>573-634-3511</b>	
REPRESENTING: <b>MISSOURI CHAMBER OF COMMERCE AND INDUSTRY</b>		TITLE: <b>LOBBYIST</b>	
ADDRESS: <b>428 E. CAPITOL AVE.</b>			
CITY: <b>JEFFERSON CITY</b>		STATE: <b>MO</b>	ZIP: <b>65101</b>
EMAIL:	ATTENDANCE:	SUBMIT DATE: <b>4/10/2024 12:00 AM</b>	
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<b>WITNESS NAME</b>			
<b>INDIVIDUAL:</b>			
WITNESS NAME: <b>SUSAN GIBSON</b>		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: <b>Onesuegibson@protonmail.com</b>	ATTENDANCE: <b>Written</b>		SUBMIT DATE: <b>4/6/2024 6:08 AM</b>
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<b>WITNESS NAME</b>			
<b>REGISTERED LOBBYIST:</b>			
WITNESS NAME: <b>TOM DEMPSEY</b>		PHONE NUMBER: <b>636-288-7461</b>	
REPRESENTING: <b>GREATER ST LOUIS INC</b>		TITLE: <b>LOBBYIST</b>	
ADDRESS: <b>3103 BUCKSKIN PATH</b>			
CITY: <b>ST. CHARLES</b>		STATE: <b>MO</b>	ZIP: <b>63301</b>
EMAIL:	ATTENDANCE:	SUBMIT DATE: <b>4/10/2024 12:00 AM</b>	

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<b>WITNESS NAME</b>			
<b>INDIVIDUAL:</b>			
WITNESS NAME: <b>ARNIE C."HONEST-ABE" DIENOFF-STATE PUBLIC ADVOCATE</b>		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: <b>arniedienoff@mail.com</b>	ATTENDANCE: <b>Written</b>		SUBMIT DATE: <b>4/10/2024 12:38 AM</b>
<b>THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.</b>			
<b>I am Opposed to Creating yet another "Advisory Board."</b>			



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<b>WITNESS NAME</b>			
<b>INDIVIDUAL:</b>			
WITNESS NAME: <b>ARNIE C."HONEST-ABE" DIENOFF-STATE PUBLIC ADVOCATE</b>		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: <b>dienoff@mail.com</b>	ATTENDANCE: <b>Written</b>		SUBMIT DATE: <b>4/10/2024 11:23 PM</b>

**THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.**

**I am opposed to this Proposed Bill and yet the creation of another Advisory Board and Commission.  
There is no real purpose.**