



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 592		DATE: 2/26/2025	
COMMITTEE: Crime and Public Safety			
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 ADVOCAT		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: arniedienoff@yahoo.com	ATTENDANCE: In-Person		SUBMIT DATE: 2/26/2025 11:58 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			
I am in Support of these changes on their face.			



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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: MARCIA HAZELHORST		PHONE NUMBER: 573-680-6463	
REPRESENTING: MISSOURI JUVENILE JUSTICE ASSOCIATION		TITLE:	
ADDRESS: 308 E HIGH STREET, SUITE 105			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65102
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/26/2025 12:00 AM	

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WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: DANIEL FELDMAN		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL:	ATTENDANCE:		SUBMIT DATE: 2/26/2025 12:00 AM
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