



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: ALANNA AHERN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: alannamaria@protonmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 9:20 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: AMANDA HICKENBOTTOM-CONNER | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: mandiehickenbottom@yahoo.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 9:47 PM |
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: AMBER HORTON | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: ahorton3131@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 8:14 PM |
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: AMY REED | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: areedster@hotmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 8:25 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |

We need our ids for just about everything these days from driving a car to going to the doctor to proving our age. Let's keep only registered American citizens voting in our elections.



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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: ANDREW KRUSE | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: andycruse@hotmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 8:14 PM |
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: ANDREW MICHAEL JOHNSON | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: Hbjohnson132@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:50 PM |

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Requiring photo ID adds no significant burden to the voter and gives all voters greater confidence that an election was conducted fairly.



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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: ANGELA GOOD | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: amgood2086@yahoo.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 9:53 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |
| I support this bill. I want voter id required in the state of Missouri. | | | |



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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: ANN YOUNG | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: annbarrecayoung@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 9:06 PM |
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: ASHLEY TWELLMAN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: ashtwellman@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:49 PM |
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: BECKY WOODS | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: bwoods.dssm@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 8:17 PM |
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: BEV EHLEN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: bevehlen@yahoo.com | | ATTENDANCE: Written | SUBMIT DATE: 2/10/2022 7:05 PM |
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: BRIAN BINKLEY | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: binkleybrian1@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 8:00 PM |
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: BRIAN D BARBAGALLO | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: brianbarbagallo@msn.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 9:42 PM |

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

Who are you? Oh yes you can vote here. Thank you.



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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: BRITTNEY MANIER | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: blmanier@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:18 PM |
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: CALEB RUST | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: rustydrums2002@yahoo.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:18 PM |
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Voter ID should be required to vote. You have to have an ID for almost everything else in life. All election fraud must be stopped. We need a full forensic audit done of the 2020 Missouri election as other states are doing.



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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: CAROL | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: allaboutjesus@centurytel.net | | ATTENDANCE: Written | SUBMIT DATE: 2/10/2022 10:28 PM |

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I am in support of HJR94.



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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: CAROL LITTMANN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: stephenlittmann@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:03 PM |
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: CAROL ORPHAN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: caorphan@sbcglobal.net | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 11:09 PM |
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: CAROLINE RUTH MUELLER | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: peanut_mueller@hotmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:38 PM |
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: CARRIE FARROW | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: farrowk77@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 11:24 PM |
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: CARRIE FARROW | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: farrowk77@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:21 PM |
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: CATHY BOERO | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: cab68203@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 9:28 PM |

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I have to have an ID to get on a plane, to get into a bar. We should have to show it to vote.



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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: CHARLES B DEFARKAS | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: cdefarkas@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 9:58 PM |
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: CHRISTINE LEWIS | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: christinemlewis6@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 9:52 PM |
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: CHRISTY D SHELTON | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: My5blessingsn07@aol.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 8:14 PM |
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| Photo ID. NO MORE CHEATING! | | | |



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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: COLETTE KINGSTON | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: colette.kingston@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:18 PM |
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: CORI PHELPS | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: doccor123@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 9:27 PM |
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: CYNTHIA L. JONES | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: singingblonde@hotmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 12:33 PM |

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

Like a majority of Americans, I support a requirement for proof of identification in order to cast a ballot in any election in the US. Election integrity is a concern of many, after witnessing the results of states not following their state laws and established election procedures in the last election cycle. Proof of identification is standard practice in most European countries, which enjoy the same history of jurisprudence as America.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|--|-------------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: CYNTHIA MUELLER RICE | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: rice_cynthia@netzero.net | | ATTENDANCE: Written | SUBMIT DATE: 2/10/2022 10:24 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |
| I support HJR 94. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|--|-------------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: DANIELLE VANCIL | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: daniellevancil03@gmail.com | | ATTENDANCE: Written | SUBMIT DATE: 2/10/2022 7:52 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: DARYN ROSS | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: darynr@your-image.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 9:46 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: DAVID NORRIS | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: DavidNorris15627@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 9:17 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: DAWN COX | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: dawncox15@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:36 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: DEBRA NUGENT | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: nugentdeb55@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:13 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: DIANE UNGER, RN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: dianeunger@hotmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 9:54 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: DON GRIMM | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: dhgjlg@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 8:27 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: ELIZABETH ANNE PETERSEN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: beth10344@aol.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 9:00 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|--|-------------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: ERIN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: erinrice24@yahoo.com | | ATTENDANCE: Written | SUBMIT DATE: 2/10/2022 8:10 PM |

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Support ID to vote. Just like I had to show my ID for vaccine



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: GARY BROWN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: garymbrown6@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 8:46 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: HEATHER KRUSE | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: heatherekruse@yahoo.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 8:13 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: HEATHER LEONE-WILSON | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: heatherleonewilson@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 9:46 PM |

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

Voter identification must be required in MO



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: HEATHER R. HERBOLD | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: hh4894hh@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 8:15 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: HUGH MACKENZIE | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: meganmackenzie4@yahoo.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:39 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|--|-------------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: JAIME CHEANEY | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: jcheaney@yahoo.com | | ATTENDANCE: Written | SUBMIT DATE: 2/10/2022 9:05 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|-------------|---|----------------------|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES | | | |
| WITNESS NAME | | | |
| REGISTERED LOBBYIST: | | | |
| WITNESS NAME: JAMES HARRIS | | PHONE NUMBER: 573-761-7875 | |
| REPRESENTING: OPPORTUNITY SOLUTIONS PROJECT | | TITLE: | |
| ADDRESS: 122 EAST HIGH STREET, SUITE 200 | | | |
| CITY: JEFFERSON CITY | | STATE: MO | ZIP: 65101 |
| EMAIL: | ATTENDANCE: | SUBMIT DATE: 2/10/2022 12:00 AM | |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: JAMES L. PELIS | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: jrpelis@protonmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:38 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: JAMES MARTIN MILLER | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: jamesmiller2107@att.net | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 11:02 PM |

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.
Identifying pictures ID is the most secure way



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: JAMES MARTIN MILLER | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: jamesmiller2107@att.net | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:50 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |
| Everyone needs to submit identification | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: JAMES SELESNICK | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: jamesselesnick@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:12 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|--|-------------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: JAMIE MCLAIN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: hooker434@gmail.com | | ATTENDANCE: Written | SUBMIT DATE: 2/10/2022 8:37 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |
| In support of | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: JANET HENNESSEY | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: yodabird1@hotmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:07 PM |

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

Everyone has access to a proper ID. This requirement to vote should be a given



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: JEFF SCHIEBER | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: schiebdog1974@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 9:28 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: JENNIFER BOREN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: 22jmarie@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:11 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: JENNIFER HULL | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: goofydog1018@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:09 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|--|-------------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: JENNIFER NOLEN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: jenn@thecrashpad.com | | ATTENDANCE: Written | SUBMIT DATE: 2/10/2022 8:58 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: JENNIFER SPENCER | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: silks-vesting0x@icloud.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 8:01 PM |

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

No one should be allowed to vote without photo ID. There is rampant election fraud in this country and it needs to stop.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: JESSICA FORST | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: happyjessie_cheer@yahoo.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 8:45 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: JESSICA GRIMM | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: jessica8184@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 8:25 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: JIM CONRADY | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: misterbigdog@hotmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:01 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |

I support this.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|--|-------------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: JIMMIE J. RICE | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: jricejr20@gmail.com | | ATTENDANCE: Written | SUBMIT DATE: 2/10/2022 10:31 PM |

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

I support HJR 94.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: JOHANNA BEAUDEAN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: johannabeaudean@yahoo.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 7:54 PM |

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

I support voter identification laws to reduce election fraud.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: JOSHUA LEHMAN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: rightmancan@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 7:57 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: JUDITH MOOREFIELD | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: jlrmoorefi@aol.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 9:54 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|--------------------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES | | | |
| WITNESS NAME | | | |
| BUSINESS/ORGANIZATION: | | | |
| WITNESS NAME: JUDY SOFKA | | PHONE NUMBER: 636-379-0128 | |
| BUSINESS/ORGANIZATION NAME: MISSOURI PRECINCT PROJECT/MOPP | | TITLE: | |
| ADDRESS: 15 ELIZABETH ERIN CT | | | |
| CITY: O FALLON | | STATE: MO | ZIP: 63368 |
| EMAIL: jsofka@yahoo.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 11:58 PM |

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In support of both bills above on behalf of myself and our statewide organization, Missouri Precinct Project/MOPP for which I am State Coordinator.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: JULIA JANSMA | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: julia.jansma@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 11:04 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: JULIE DUNCAN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: jduncan002@msn.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:43 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: KAREN L BRIGGS | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: karen.briggs2@att.net | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 7:53 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: KAREN LEVY | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: klevy07@yahoo.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:54 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: KAREN MELENDY | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: karenmelendy@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:40 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: KARIN WASHINGTON | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: ksgave@yahoo.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 9:23 PM |
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I believe to vote in Missouri, a person should have to show an id. This is the most important duty citizens have for our country.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: KATE STRATTON | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: kmes@sbcglobal.net | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 9:54 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: KATHLEEN LEE | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: guykathylee@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:09 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: KATHRYN HAMMEN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: kjgh2490@windstream.net | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 9:23 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: KATHRYN S SCHOECK | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: schoeckk@yahoo.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 8:28 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |

In support of



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: KATHRYN S SCHOECK | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: schoeckk@yahoo.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 8:25 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |
| Yes I support this bill. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: KATIE LEVY | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: ktlevy4@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 11:04 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: KATIE LYCZAK | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: Katie.lyczak@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:13 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: KELLY HOOKER | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: gkhooker@yahoo.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 7:43 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: KENNETH AGNE | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: kenagne@sbcglobal.net | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:07 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: KIM PENROD | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: seektruth7@protonmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:04 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: KRISTINE WARNER | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: klwarner56@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:46 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: LAURA FELDMANN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: alfeldmann@sbcglobal.net | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 8:33 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: LAURA SMITH-DEFARKAS | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: Lsdefarkas@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:03 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: LAURIE NICEWANER | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: mo.stlouis@ourvolunteer.org | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 9:48 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: LINDA | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: theconrady@yahoo.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:05 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |
| Please support this. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: LINDA WADDELL | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: lindakwadd@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:13 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: LISA WILLIFORD | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: lwillifo58@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:37 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: LORA YOUNG | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: bugman987@yahoo.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 8:42 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: LORI | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: ratley_family@yahoo.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:07 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: LORI BOURGEOIS | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: lbourgeois32@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:00 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: MARG DEIBEL | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: mjdeibel@yahoo.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 8:15 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: MARJORIE STOEKER | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: mjschanges@peaknet.net | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 9:51 AM |

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

A Photo ID for voting in Missouri is a must to keep our election integrity



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: MARK VOETTER | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: mark.voetter@charter.net | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 8:09 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: MARLA FASTENAU | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: mfastenau3@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:01 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: MARSHA KING | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: makingstuff@sbcglobal.net | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:36 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: MATTHEW BOURGEOIS | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: mattbourgeois64@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:09 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: MEGAN MACKENZIE | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: meganmackenzie4@yahoo.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:38 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: MELISSA JAMES | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: melissajames25@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 11:11 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: MICHAEL HARTMAN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: mike.hartman55@yahoo.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 9:09 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: MICHAEL HILBERT | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: 29mhil@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:50 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: MICHELLE BRANDT | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: michellebrandt@protonmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 11:25 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: MICHELLE FLIEG | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: pmflieg@yahoo.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:49 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: MICHELLE SELESNICK | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: mlb774@yahoo.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 8:17 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: MIRANDA TASKER | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: mstasker82@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 11:20 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: MONA JOHNSTON | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: monacj@sbcglobal.net | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:28 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: NADINE VARGA | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: summersally@use.startmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:06 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|--|-------------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: NANCY GRIFFITH | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: just4nancy@me.com | | ATTENDANCE: Written | SUBMIT DATE: 2/10/2022 10:52 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: NATHAN BILLINGS | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: bignatebillings@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:16 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: NICK SNYDER | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: ncsnyder@rocketmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 7:55 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: PAMELA HEYEN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: pam@heyenwellnesstherapies.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:02 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: PAMELA WIRICK | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: anteak4fun@aol.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 7:55 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |
| Fully Support | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: PATRICIA A HILBERT | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: patticarter22169@yahoo.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:16 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: PATRICIA WHITE | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: patti.white.rn@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:19 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: PATRICIA WHITE | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: patti.white.rn@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:23 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: PATRICIA WISCHMANN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: trybnb@yahoo.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 9:55 AM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: PATRICK MILLER | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: pbjlmiller@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 9:55 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |
| I support this bills | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: PAULA A. HARVEY | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: imafirequeen@yahoo.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 8:39 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |
| Please vote in support of both bills! | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: PAULA JUELICH | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: juelich@juno.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:25 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: RACHEL BOURGEOIS | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: rachelbourgeois81@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:22 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: RACHEL BOURGEOIS | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: rachelbourgeois81@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:28 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: REBECCA PORTER | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: babeck@swbell.net | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 7:57 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|--|-------------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: REBEKAH ROBERTS | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: theyoungroberts@protonmail.com | | ATTENDANCE: Written | SUBMIT DATE: 2/10/2022 7:55 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: ROB ARNONE | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: drarnone@live.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:09 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: ROBBYN KEMPF | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: rkempf70@me.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 9:17 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: ROBERT BOURGEOIS JR | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: rob66@rocketmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:25 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: RON JOECKS | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: rrjoecks@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 9:57 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |
| Common sense everyone! Do the right thing! | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: SARA GUTHRIE | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: sjaneguthrie@outlook.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:28 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: SARAH REEVES | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: sarahreevesrn@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:14 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: SHARON JACKSON | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: sjincpottery@hotmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 11:08 PM |

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

This should help alleviate voter fraud. Why would anyone not want secure elections!



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: SHAUNA POGGIO | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: shaunapoggio@yahoo.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 9:38 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |

I am in favor of HJR 94 to require photo identification for voting. Missouri has a duty to protect the integrity of our elections. Photo identification is one necessary step to achieve this.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: SHAWN KAISER | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: tswiese@charter.net | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 7:51 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: SHEILA A KEATING | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: dandskeat@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:55 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: SHELLY GRAVES | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: shelly_graves@outlook.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 8:51 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: SOPHIA BOURGEOIS | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: b.sophia114@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:00 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: SUSAN BOSSE | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: dsbosse@centurytel.net | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:23 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|--|-------------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: SUSAN STONECIPHER | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: sscallygraphy@aol.com | | ATTENDANCE: Written | SUBMIT DATE: 2/10/2022 8:55 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: SUSANNE BOEHM | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: sboehm1977@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 8:29 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: TARA GARCIA | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: salsaespanol@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:32 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: TERESA SIMPSON | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: simpson69@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 8:43 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|-------------------------------|---------------------------|--|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: THOMAS RICE | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: tgr112158@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 9:15 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |
| This is a no brainer....highly supportive of this! | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: TOM LATHAM | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: tlatham223@yahoo.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:44 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: TOM WADDELL | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: tomawaddell@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:18 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: TRACY DOUGAN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: tracydougan2011@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 9:57 PM |
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MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: TRACY DOUGAN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: tracydougan2011@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 9:55 PM |
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MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: TRICIA LAVIN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: tricialavin15@yahoo.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:23 PM |
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MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES | | | |
| WITNESS NAME | | | |
| BUSINESS/ORGANIZATION: | | | |
| WITNESS NAME: TRISH VINCENT | | PHONE NUMBER: 573-751-8731 | |
| BUSINESS/ORGANIZATION NAME: SECRETARY OF STATE | | TITLE: DEPUTY SECRETARY OF STATE | |
| ADDRESS: 600 WEST MAIN STREET | | | |
| CITY: JEFFERSON CITY | | STATE: MO | ZIP: 65101 |
| EMAIL: | ATTENDANCE: | SUBMIT DATE: 2/10/2022 12:00 AM | |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: TROY MAYFIELD | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: tmmayfield67@protonmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:16 PM |
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I support this



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: VALERIE SWEARINGEN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: mikezach4@aol.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:26 PM |
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MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: VICKI DUNN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: dunntom@sbcglobal.net | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 9:57 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: WENDY A. WISNIEWSKI | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: wendy4cm@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 9:31 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: WENDY C MELROSE | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: wendycmelrose@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:26 PM |
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Yes. Voter ID please.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: WENDY C. MELROSE | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: wendycmelrose@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:28 PM |

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Yes please. Voter ID.



MISSOURI HOUSE OF REPRESENTATIVES
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| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| 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: WILMA RADEMAKER | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: wmbriner@yahoo.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 11:06 PM |
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MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES | | | |
| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: ABIGAIL PANKAU | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: abby.pankau@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/8/2022 10:13 PM |
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This resolution to amend the Missouri Constitution will impose unnecessary restrictions and impediments for voters that will keep legal voters from voting in elections. This resolution will require a govt issued photo ID to vote. Requiring a photo ID will restrict voting to only those who have the time and money to acquire one, essentially creating a poll tax, which is unconstitutional by the US Constitution. This restriction will not make voting more secure, but will keep legal voters from voting in elections.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES | | | |
| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: ALBERTA MOBLEY | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: tamobley@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/8/2022 9:34 PM |
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| We need to make it easier to vote, not harder. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
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| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES | | | |
| WITNESS NAME | | | |
| BUSINESS/ORGANIZATION: | | | |
| WITNESS NAME: ARLENE ZAREMBKA | | PHONE NUMBER: 314-863-2587 | |
| BUSINESS/ORGANIZATION NAME: MOMENTUM: MISSOURI MOVING FORWARD | | TITLE: COORDINATOR, MOMENTUM: MISSOURI MOVING FORWARD | |
| ADDRESS: 7500 TRENTON AVENUE | | | |
| CITY: ST. LOUIS | | STATE: MO | ZIP: 63130 |
| EMAIL: zarembka-politics@sbcglobal.net | ATTENDANCE: Written | SUBMIT DATE: 2/9/2022 9:35 PM | |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |

MOmentum: Missouri Moving Forward submit this testimony in opposition HB 1878 and HJR 94. **MOmentum** is a non-profit and non-partisan organization with over 400 members that promotes democratic values. **MOmentum** follows legislative matters, both in Missouri and nationally, and sends out action alerts to its members. **HB 1878** **MOmentum** opposes **HB1878** and **HJR 94**, which would mandate that a Missouri voter must provide a photo ID in order to exercise their right to vote. All Missouri Voters must show some form of ID at the polls to vote. For decades, Missouri voters have been able to vote by providing non-photo evidence of their identity. **HB 1878** would reduce the number of voters allowed to vote, by refusing to accept non-photo forms of ID that Missourians currently use and rely upon to verify their identity, including a voter registration card from the election authority, or a Missouri student ID. There has been no evidence of any significant fraud in Missouri elections. However, **HB 1878**, and **HJR 94** would reduce significantly the number of Missouri citizens who can vote, by rejecting forms of identification that many Missouri voters have long used to vote – e.g. evidence of their address, including a utility bill addressed to the voter and received by the voter at their address. Those facing the greatest difficulty voting if this bill is approved will be those citizens who do not have a photo ID -- for example, elderly people who no longer drive and therefore don't have a driver's license, and college students who have a non-photo ID from their college or university.

This would leave only a non-expired (or non-expiring) ID issued by the State of Missouri or Federal Government (such as current passport or military ID) as evidence of the identity of the voter - basically a Missouri driver's license or a non-driver ID from the DMV. However, many DMV offices are not open on weekends or in the evening, or are not on public transportation routes. Moreover, some counties do not even have a DMV office. • Even obtaining a birth certificate might be difficult, particularly if the voter was born outside of Missouri. And a birth certificate wouldn't necessarily establish the voter's current surname. **HB 1878** would particularly adversely impact female voters whose current last names are not the same as on the women's birth certificates. Moreover, obtaining a certified copy of one's birth certificate can require significant administrative effort and cost. and , in some cases, would require a legal name change by a court proceeding to correct typos or errors, which would be very costly. Moreover, a birth certificate might be difficult to obtain, particularly if the voter was born outside of Missouri. • Due to these kinds of barriers, photo ID requirements were found to be unconstitutional by the Missouri Supreme Court. More than 200,000 Missouri voters do not have a non-expired ID with the Department of Revenue; voters of color, seniors and voters with disabilities are least likely to have a non-expired state ID. • The photo ID provisions of **HB 1878** and **HJR 94** eliminate the non-photo forms of ID that Missourians currently use and rely upon to verify their identity, including a voter registration card from the election authority or a Missouri student

ID.HJR 94Momentum opposes HJR 94, which would propose amending the Missouri Constitution to mandate, the legislature to require voters to verify their identity through use of photo ID. • This is an effort to overturn two Missouri Supreme Court decisions - including one issued in 2020 after the Missouri Constitution was amended to authorize identification at the polls . The Missouri Supreme Court determined that eliminating non photo forms of ID would be unconstitutional and violate Missourians right to vote. The Legislature should not put an amendment to the Missouri Constitution on the ballot to eliminate the types of ID that for years have been accepted as evidence of the right of a registered voter to vote.Momentum: Missouri Moving Forward strongly opposes HJR 94, for the same reasons stated above regarding HB 1878 Arlene Zarembka, for Momentum: Missouri Moving Forward



MISSOURI HOUSE OF REPRESENTATIVES
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| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES | | | |
| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: ARNIE C. AC DIENOFF-STATE PUBLIC ADVOCATE | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: arniedienoff@yahoo.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 12:05 AM |
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I am in Full Opposition of this Bill. This Bill is very wrong for Missouri! This is Acting in a Dictator Manner of Legislation and Governance. This is taking away Control of Missourians. This is Very Wrong for Missouri! This is Bad Government Practice. This Disenfranchises Missourians and Takes Away the Right of the Residents to Change, Amend and Correct Our Valued Missouri State Constitution, As We See Fit. I Urge ALL Members of the Election Committee and the House of Representatives to Vote Down this Awful and Bad Proposed Legislation! This Goes Totally Against the Will of Six (6) Million Missourians and is a Direct Slap In the Face to Our State Constitution and Takes Away Control of Missourians Over Elected Officials and State Government. Soundly VOTE This Legislation Down To Defeat! I am a Conservative and Smart Republican and This Committee Is Messing With the People of Missouri That I love. You as Committee Members are Insulting Our Intelligence and Our Right To Direct and Retain Control of Our Great State Government. You are Embarrassing The Intelligence of OUR Six-Million Missourians. Same Committee Tricks, Different Day! Wake-Up and STOP Dumbing Us Down and Taking Away Our Inherent Rights To Govern Our Missouri. And To The Lady From Hallsville, There is NO Voter Fraud in Missouri. I have Been Waiting For Years for You To Show Us ALL The Proof. Thank Heavens That Missourians Mandate "Term-Limits!" STOP Wasting Our Money in Legal Challenges and Lawsuits Each and Every Year!



MISSOURI HOUSE OF REPRESENTATIVES
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| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: BRIGITTE SHERIDAN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: gita.gone.mom@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 8:36 PM |
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MISSOURI HOUSE OF REPRESENTATIVES
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| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: CHARLES PHILLIPS | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: ozarkwild1@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/9/2022 2:10 PM |

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Why do politicians think our right to vote needs more ID'S to insure fair and free elections? It is yet another road block to make it more difficult to cast ballots.



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| TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES | | | |
| WITNESS NAME | | | |
| BUSINESS/ORGANIZATION: | | | |
| WITNESS NAME: CHERYL ADELSTEIN | | PHONE NUMBER: 314-518-1185 | |
| BUSINESS/ORGANIZATION NAME: JEWISH COMMUNITY RELATIONS COUNCIL | | TITLE: DEPUTY DIRECTOR | |
| ADDRESS: 12 MILLSTONE CAMPUS DRIVE | | | |
| CITY: ST. LOUIS | | STATE: MO | ZIP: 63146 |
| EMAIL: cadelstein@jcrcstl.org | ATTENDANCE: Written | | SUBMIT DATE: 2/9/2022 3:37 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |

The Jewish Community Relations Council (JCRC), guided by Jewish values, advocates, educates, collaborates and mobilizes action on issues important to the Jewish community, 60,000 strong in St. Louis. We are committed to pursuing religious tolerance, civic discourse and social justice in St. Louis and beyond. HB 1878 & HJR 94 would make voting more difficult in Missouri. Instead, policymakers should be moving this state in the opposite direction. We know changes to photo ID rules disproportionately disenfranchise communities of color, people living in poverty, seniors, students and people experiencing homelessness. There also have been zero prosecuted cases of voter impersonation in Missouri. Voting rights for all is an important support of any democratic society. The JCRC has passed a voting rights policy committed to ensuring equal access to the ballot box and fighting voter suppression and discrimination in all forms. The right to vote is a crucial aspect of civic participation and ensuring politicians are accountable to everyone is an important check on abuse of power. And it is worth remembering the history here. Everyone has not always been free to participate in our democracy. As the ACLU explains, "In 1869, Congress passed the 15th Amendment giving African American men the right to vote. In 1919, Congress passed the 19th Amendment granting women the right to vote. In 1964, the 24th amendment was adopted, resulting in the elimination of poll taxes. Finally, in 1965, President Johnson signed into law the Voting Rights Act. This law aimed to support the political participation of racial and ethnic minorities by permanently invalidating existing barriers and prohibiting any election practice that denied an individual the right to vote on account of race." But still, even today voter roll purges, intimidation at the polls, photo ID and felon disenfranchisement all are barriers to true democracy in the US. That is why the JCRC opposes HB 1878 & HJR 94. We should be focusing on making it easier to vote by investigating automatic registration and no excuse absentees. The restrictive and archaic way we conduct elections is expensive and suppresses turnout. We look forward to coming back and talking to this committee about how to expand access to the ballot box and ensuring full participation in our democracy. In the meantime, we ask you to oppose HB 1878 & HJR 94.



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| COMMITTEE: Elections and Elected Officials | | | |
| TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES | | | |
| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: CONNIE FLACHS | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: conniex721@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/9/2022 9:48 AM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |

HJR would make voting more difficult in this state, disproportionately affecting those who are already marginalized in our democratic system. As a car-free individual, I know how difficult it is to acquire a government issued photo. To get my ID in Missouri I had to ask a friend for a ride, as no public transit goes to voting ID locations and the City Hall was closed, miss work, and spend multiple hours at the DMV. I was lucky to have a flexible boss who allowed me to make up the hours. Not everyone has this privilege. Should they be restrained from voting in our elections? Vote no on HJR 94.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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|--|-------------------------------|---------------------------|---|
| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES | | | |
| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: DEBORAH BERGFELD | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: debsgsd@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/9/2022 3:40 PM |

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I oppose the HJR 94 as it would create obstacles for certain classes of people to vote. It is important that ALL Missourians are able to participate in voting, to have their voices heard.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES | | | |
| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: DEBORAH J KITCHEN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: djkitchen@sbcglobal.net | ATTENDANCE: Written | | SUBMIT DATE: 2/8/2022 10:24 PM |

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State republicans wanting to MANDATE vs PERMIT? I think not. I'm opposed to this end run around the MO Supreme Court ruling.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 |
| COMMITTEE: Elections and Elected Officials | | |
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| WITNESS NAME | | |
| INDIVIDUAL: | | |
| WITNESS NAME: DEBRA COE | | PHONE NUMBER: |
| BUSINESS/ORGANIZATION NAME: | | TITLE: |
| ADDRESS: | | |
| CITY: | | STATE: ZIP: |
| EMAIL: debbiecoe@mac.com | ATTENDANCE: Written | SUBMIT DATE: 2/9/2022 2:23 PM |

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

I cannot understand why Missouri representatives want to make voting harder. Those of us who take our Participation in government seriously do not need obstacles put in our way by the very people we voted to represent us. I want to vote with ease.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES | | | |
| WITNESS NAME | | | |
| BUSINESS/ORGANIZATION: | | | |
| WITNESS NAME: DENISE LIEBERMAN | | PHONE NUMBER: 314-780-1833 | |
| BUSINESS/ORGANIZATION NAME: MISSOURI VOTER PROTECTION COALITION | | TITLE: DIRECTOR & GENERAL COUNSEL | |
| ADDRESS: 6047 WATERMAN BLVD. | | | |
| CITY: ST. LOUIS | | STATE: MO | ZIP: 63112 |
| EMAIL: denise@movpc.org | ATTENDANCE: In-Person | SUBMIT DATE: 2/9/2022 8:43 PM | |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |

HJR 94 is yet another attempt to effectuate a work-around to Missouri's strong constitutional protections for voting by weakening the right to vote enshrined in the Missouri Constitution in order to promulgate strict photo ID requirements that the Missouri Supreme Court has found unconstitutional. Lawmakers should reject efforts to weaken or remove protections for the fundamental right to vote. The Missouri Constitution "establish[es] with unmistakable clarity that the right to vote is fundamental to Missouri citizens." *Weinschenk v. State*, 203 S.W.3d 201, 212 (Mo. banc 2006), providing an explicit, affirmative constitutional right to vote that is more extensive than provided by the federal constitution. Under the Missouri Constitution, any law that significantly burdens the right to vote is subject to strict scrutiny, the highest level of judicial review, a standard that has been re-affirmed by the Missouri Supreme Court in two cases involving photo ID requirements to vote. Based on Missouri's stronger constitutional protections, the Missouri Supreme Court in *Weinschenk* concluded that a strict photo ID requirement imposes "a heavy and substantial burden on Missourians' free exercise of the right of suffrage" in violation of the Missouri Constitution. The passage of Amendment 6 in 2016 allowing the legislature to require voters to verify their identity at the polls through measures that may include a photo ID, does not render the strict photo ID requirement in HB 1878 constitutionally permissible. That amendment allows the legislature to require voters to verify their identity through measures that may include photo ID, but does not provide for the strict limits in HB 1878. In January 2020, in *Priorities USA v. State of Missouri*, the Missouri Supreme Court struck the affidavit requirement for non-photo ID options to vote, but kept the non-photo ID voting options intact. This was premised on the Court's view that Photo ID-only voting remains unconstitutional in Missouri, even after Amendment 6. In that case, the State had suggested that if the affidavit for Option 2 ID was struck, that all Option 2 IDs should go as well. The Missouri Supreme Court considered the state's request to strike the non-photo ID options altogether – which is what H.B. 1878 would do – and concluded that it would not pass constitutional muster. HJR94 seeks to make the photo ID provision mandatory rather than permissive, but this only operates if the fundamental nature of voting provided by our constitution is gutted. Lawmakers should reject efforts to weaken and eliminate the fundamental nature of the right to vote in Missouri and instead should uphold their sworn obligation to protect the fundamental rights afforded to Missourians under our constitution.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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| COMMITTEE: Elections and Elected Officials | | | |
| TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES | | | |
| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: DENNIS AND BARBARA GAYLOR | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: maddbg@aol.com | ATTENDANCE: Written | | SUBMIT DATE: 2/9/2022 10:59 AM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |

The right to vote is at the center of this democracy we live in. It is a privilege afforded to every citizen of this United States. Without the right to vote in a free and fair election, the voters have no expression or power to individually decide who will govern this country on federal, state, and local levels. There is little to no evidence of voter fraud in Missouri. There is absolutely no need for more restrictions on the right to vote in Missouri. Limiting the right to vote along with gerrymandering the districts are enemies of democracy and provides nothing more than a powerful autocracy of which all citizens in Missouri should abhor.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: DON CROZIER | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: doncrozier@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/9/2022 1:31 PM |

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

HJR 94 imposes strict photo ID requirements. This would make it harder for Missourians to make their voices heard with their vote. The elderly, the poor, and people who are otherwise disadvantaged do not drive and do not possess a photo ID. The right to vote is fundamental and we should not make it harder for certain segments of our society to participate.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: FRANCINE GLASS | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: fran813@gmail.com | | ATTENDANCE: Written | SUBMIT DATE: 2/9/2022 11:26 AM |

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**I strongly oppose this resolution / bill because it will make it more difficult for Missourians to vote.
Please oppose HJR 94.**



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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| COMMITTEE: Elections and Elected Officials | | | |
| TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES | | | |
| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: GETTA R. HALL | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: getta_hall@yahoo.com | ATTENDANCE: Written | | SUBMIT DATE: 2/8/2022 8:41 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |

Good Day,I am a 71-year-old taxpayer and registered voter. I am a fully-paid Golden Life member of both the NAACP and Delta Sigma Theta Sorority, Inc., a public service sisterhood founded on Christian principles. I lived in Iowa and California for a time (a total of about 10 years). I have voted in just about every election in Missouri since I turned 21. I still have my original voter registration card I received in 1971 when I turned 21. It is cracked and even though I have worn out several billfolds, I still carry it with my other id cards. My voter registration card was issued by the Kansas City, MO Board of Elections 50 years ago. The Board of Elections sends me notifications in postcard form of primary, general and ballot initiatives for city, county, state and national elections by mail. I have been vetted by them through name and various address changes.The notifications tell me where to vote and should serve as my voting credentials at my polling location or for an absentee (early) vote. It is mailed to the address on record. This voter registration postcard should entitle me to vote just like a driver's license entitles me to drive. A Missouri driver's license is valid for up to 6 years. People can move in a span of 6 years. Then, the driver's license address is different from the current address. Women can change their last names when they marry and divorce. Then, the name is different. Both happened with me. Therefore, a voter registration postcard is a better form of validation for voting.I served as a registrar in voter registration drives at church as part of "Souls to the Polls" and other places as part of Delta's KCMO Alumnae Chapter's Social Action. I helped update names and addresses. I submitted updates when my last name and address has changed.Photo id bills invalidate my certified voter post cards. Requiring photo id is unconstitutional per the Missouri Supreme Court. Why do these bills keep coming up? HB 334, 1878, 2021, 2113 and 2140 and HJR94 are not in the best interests of our democratic process. State and federal photo ids cost money. All registered voters have the right to vote. • What about people who do not drive or do not have a reason to own a passport?• What about photo ids that do not look like the registered voter? 1. I worked at the 2020 Census to count the population that determines the number of Missouri's US House of Representatives and federal funding. Female employees took photo id pics with green, blue, pink or purple hair and then changed their hair color to a natural color and / or dyed or cut or grew their hair subsequently. People wear wigs.2. People gain and lose weight over a 6-year period – term of a driver's license.3. Changes to appearance (i.e., colored contacts) make visual verification challenging. •Why would a voter id card issued by the Board of Elections be invalid for voting?Why would a driver's license issued by the DMV be valid for voting?In Texas, a hunting license is valid id for voting but a student id is not. Does that make any sense? Stop trying to disenfranchise the populace (young, elderly, poor).HB1455 makes it illegal to pass out blank absentee ballot applications and HB2002 requires party declaration (nobody's business) at registration. I have distributed literature at the polls in the past. Declaring political party at a primary is sufficient for the voting process. Amazed by His Grace, Sis. Getta R. Hall (pronounced "G" as in Glory -

“Ta” “Hall” as in Hallelujah)



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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| COMMITTEE: Elections and Elected Officials | | | |
| TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES | | | |
| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: GISELLE BROWN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: jillbrown.stl@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/9/2022 8:54 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |

This is a terrible idea. What about out-of-state college students? What about people who no longer need a driver's license and are unable to easily get out to get a picture id? Someone elderly or someone who is disabled. Why would it need to be in the constitution. Terrible idea



MISSOURI HOUSE OF REPRESENTATIVES
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| COMMITTEE: Elections and Elected Officials | | | |
| TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES | | | |
| WITNESS NAME | | | |
| BUSINESS/ORGANIZATION: | | | |
| WITNESS NAME: JACOB HUMMEL | | PHONE NUMBER: 573-634-2115 | |
| BUSINESS/ORGANIZATION NAME: MISSOURI AFL-CIO | | TITLE: PRESIDENT | |
| ADDRESS: 131 E. HIGH STREET STE 100 | | | |
| CITY: JEFFERSON CITY | | STATE: MO | ZIP: 65101 |
| EMAIL: jakehummel@moaflcio.org | ATTENDANCE: Written | | SUBMIT DATE: 2/9/2022 3:49 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
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| TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES | | | |
| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: JOAN GENTRY | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: joangentry2012@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/9/2022 12:02 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |

HJR 94 and HB 1878Re: Written testimony in opposition to HJB 94 and HB 1878Dear Chairperson Shaul and Members of the Elections and Elected Officials Committee,In spite of COVID-19, 3,025,962 eligible voters in Missouri cast their ballots for the November 2020 elections. Missouri's voter participation was at 70.07%. Secretary of State Ashcroft and local election authorities declared that the 2020 election was safe and secure. In spite of the potential presence of "thousands" of dead voters on some of the local election authority voter registration lists, no dead voters actually voted and no populations of non-citizen immigrants voted. And, upon reading the content of Secretary Ashcroft's press release of August 26, 2021, titled "Ashcroft Uncovers Voter Fraud and Demands Prosecution", only two individuals were involved. That's two voters out of over three million. In a Missouri Times article dated November 30, 2020, and written by Kaitlyn Schallhorn, Secretary Ashcroft was quoted as saying "We had thousands of poll workers who came out and did a great job to make sure everyone could vote. And the voters of this state, they weren't scared. They didn't stay home. They did what was necessary for our republic to continue, and that's for citizens to be active, to be self-informed, and to participate in our elections," Ashcroft, a Republican, said. "I love Missouri, but Missouri showed the rest of the country how to do it." Why, then, are we confronted with HB 1878 and HJR 94?HB 1878 and HJR 94 mandate strict photo ID requirements for the purposes of voting by requiring a photo ID obtained through the Department of Motor Vehicles or a U.S. Passport. More than 200,000 voters in Missouri lack a non-expired photo ID. Voters of color, senior citizens, voters with disabilities and college students are the most common Missouri voters who do not have an ID issued through the Department of Motor Vehicles. These folks will face multiple glitches in obtaining an ID through the DMV including lack of transportation to the DMV office, no DMV office available, hours the DMV office is open, and underlying documents that may be impossible to obtain. These are voters who already have voter identification cards issued by the local election authorities. What about potential voters who face these same barriers? Why are these populations being targeted? I sincerely hope that that is not what is happening and that all voters are valued.I urge you to vote no to HJR 94 and HB 1878.



MISSOURI HOUSE OF REPRESENTATIVES
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: JULIANNA SELLERS | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: jsellers@poetryforpersonalpower.org | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 11:53 AM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |

I would like to enter my testimony in opposition to this bill. Further restricting Voter ID makes it voting less accessible to those with disabilities. For example, my 21 year-old-daughter has Chronic Fatigue Syndrome. The effort required in leaving the house leaves all of her symptoms worse and her unable to do much to sleep for as long as a week afterwards. She would not have been able to vote in the last election had this been in place because her Driver permit had expired and she hadn't been up to getting her Non-drivers Id yet. Utilizing curbside voting, and the ability to use her photo id even though it was expired, allowed her the opportunity to still exercise her right to vote. She is also immunocompromised so having to leave the house, deal with lines, expose herself to illness, just to update an id is a huge barrier to her. I'm sure she is not the only one who is dealing with these challenges. Please don't make things more difficult than they have to be for voters who already face significant challenges due to their disability.



MISSOURI HOUSE OF REPRESENTATIVES
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: KATHLEEN MCGINNIS | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: kathypjn@aol.com | | ATTENDANCE: Written | SUBMIT DATE: 2/9/2022 5:25 PM |

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I am very much in favor of voting rights, and am opposed to legislation which makes it more difficult for people to vote. I am opposed to both HB 1878.



MISSOURI HOUSE OF REPRESENTATIVES
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: LEONA BOCHANTIN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: lbochantin88@att.net | ATTENDANCE: Written | | SUBMIT DATE: 2/9/2022 2:30 PM |
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Vote no on HJR 94



MISSOURI HOUSE OF REPRESENTATIVES
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: LINDA BRUNNER | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: grnthumb@windstream.net | ATTENDANCE: Written | | SUBMIT DATE: 2/9/2022 7:28 PM |

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I see no need to make voting any more difficult than it already is. A driver's license or S.S. card should be plenty enough.



MISSOURI HOUSE OF REPRESENTATIVES
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: LINDA REZNY | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: LRezny@hotmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 4:41 AM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |

This measure would outlaw several current ways to ID a voter. This has been in court before and was denied. I will let others discuss that. Other problems: In line 5, it uses MAY to add the possibility of provisional ballot by legislation. It should be SHALL. Signature match is not mentioned as part of the provisional process in this Constitutional amendment and could then be removed later. The ballot language does not mention the possible signature match. The ballot language is so vague and similar to the 2016 vote that people will wonder why we are doing this again.



MISSOURI HOUSE OF REPRESENTATIVES
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: MARISSA POLZIN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: ritmeyer03@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 3:46 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: MARY PATRICIA PATTERSON | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: marypat57@live.com | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 6:46 AM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |

Over 200000 Missouri voters lack a non-expired ID with the Department of Revenue. I was one of them! Though it may seem easy to just get an ID, if you rely on public transportation as a sole method of travel, if you don't drive, if you are disabled, it is a hoop that should not be necessary. This measure is not necessary. There is no widespread fraud, but there is plenty of data of how photo ID laws suppress the vote of the disenfranchised. I travelled to Jeff City yesterday and was not given the chance to speak due to time restrictions, but it was that important to me.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
| COMMITTEE: Elections and Elected Officials | | | |
| TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES | | | |
| WITNESS NAME | | | |
| BUSINESS/ORGANIZATION: | | | |
| WITNESS NAME: MELISSA VATTEROTT | | PHONE NUMBER: 314-727-0600 | |
| BUSINESS/ORGANIZATION NAME: MISSOURI COALITION FOR THE ENVIRONMENT | | TITLE: POLICY DIRECTOR | |
| ADDRESS: 725 KINGSLAND AVE, SUITE 100 | | | |
| CITY: ST. LOUIS | | STATE: MO | ZIP: 63130 |
| EMAIL: mvatterott@moenvironment.org | ATTENDANCE: Written | | SUBMIT DATE: 2/9/2022 3:16 PM |

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

February 9, 2022 Representative Dan Shaul Elections and Elected Officials Committee Missouri House of Representatives 201 W Capitol Ave., Rm. 313-1 Jefferson City, MO 65101 Dear Chairman Shaul and Members of the Committee, The Missouri Coalition for the Environment is a statewide, advocacy nonprofit organization that works to empower Missourians to protect their environment and health. House Joint Resolution No. 94 attempts to circumvent the Missouri Supreme Court decision that found requiring photo ID for voting unconstitutional by changing the constitution itself, which would make it significantly harder for all eligible Missourians to participate in the democratic process. For this reason, we respectfully ask that you oppose HJR 94. This bill imposes the need for photo identification to vote, which the Missouri Supreme Court previously found unconstitutional because of the immense barrier that procuring a photo ID can pose for some people. Codifying this into the constitution is an attempt to not only subvert the Missouri Supreme Court ruling, but also to make it unreasonably difficult to vote for many Missourians. The Missouri Legislature should honor the desire of Missourians to vote and participate in the democratic process with ease and this bill would make it more difficult for them to do so. We hope this committee will demonstrate that they value having every person vote who is eligible by making voting accessible to Missourians. Once again, the Missouri Coalition for the Environment asks you to vote "no" on HJR 94 in order to protect Missourians ability to vote with ease, thereby protecting the democratic nature of voting. Thank you for your time. Sincerely, Melissa Vatterott, JD Policy Director Missouri Coalition for the Environment mvatterott@moenvironment.org (314) 727-0600, ext. 111



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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| COMMITTEE: Elections and Elected Officials | | | |
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: MIKKAILA POULIN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: mikkaila.poulin@gmail.com | | ATTENDANCE: Written | SUBMIT DATE: 2/9/2022 1:57 PM |

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This will make it much more difficult for individuals to vote and is classist



MISSOURI HOUSE OF REPRESENTATIVES
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: NANCY QUIGLEY | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: nancyquig@earthlink.net | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 10:31 AM |

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We need to clear away the hurdles that make it more difficult for people in Missouri to vote. Having a photo ID is one of these hurdles. Voting is the right and privilege of every citizen and joining in the democratic process of voting should be encouraged.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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| BILL NUMBER: HJR 94 | | DATE: 2/10/2022 | |
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| WITNESS NAME | | | |
| REGISTERED LOBBYIST: | | | |
| WITNESS NAME: OTTO FAJEN | | PHONE NUMBER: 573-634-3202 | |
| REPRESENTING: MISSOURI NEA | | TITLE: LEGISLATIVE DIRECTOR | |
| ADDRESS: 1810 EAST ELM STREET | | | |
| CITY: JEFFERSON CITY | | STATE: MO | ZIP: 65101 |
| EMAIL: otto.fajen@mnea.org | ATTENDANCE: Written | | SUBMIT DATE: 2/10/2022 7:10 AM |

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The Association opposes barriers that keep eligible citizens from voting and being politically active, including additional mandates that require registered voters to provide a government-issued photo identification.



MISSOURI HOUSE OF REPRESENTATIVES
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: RABBI SCOTT SHAFRIN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: sshafarin@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/9/2022 11:38 AM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |

The right to vote is the life-blood of our democracy, our freedoms, and our way of life. To deny this fundamental right, to any citizen, is tantamount to discriminatory oppression. Politics and access to power cannot corrupt our duty to the citizens of our state and this great land, and any barriers to voting, or powers to overturn, subvert, discourage, or quell the voices of the people of our communities are anathema to the American way of life and should not ever be up for debate. These initiatives must stop and we must work to ensure that every voter not only has access to the vote, but is **ENCOURAGED** to vote, regardless of their political ideology, race, ethnicity, religion, personal history, or any other piece of their identity. If the rights to vote and have that vote fairly counted is in any way infringed upon, we forfeit our right to be called "the land of the free."



MISSOURI HOUSE OF REPRESENTATIVES
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: RANDEE STEFFEN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: randee.steffen2@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/9/2022 1:15 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |

I do not see the need for changing the voter ID laws in MO. I was an election judge during the 2020 election and found the existing system to be very secure and also made it easy for everyone who wanted to vote. Further restricting access to vote does not help our democracy. There is no need to make it more difficult to vote. We do not have a voting fraud issue and all this does is disenfranchise people who don't have access to a picture ID.



MISSOURI HOUSE OF REPRESENTATIVES
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| WITNESS NAME | | | |
| REGISTERED LOBBYIST: | | | |
| WITNESS NAME: RON BERRY | | PHONE NUMBER: 660-537-2239 | |
| REPRESENTING: AARP | | TITLE: | |
| ADDRESS: P.O. BOX 722 | | | |
| CITY: JEFFERSON CITY | | STATE: MO | ZIP: 65102 |
| EMAIL: | ATTENDANCE: | SUBMIT DATE: 2/10/2022 12:00 AM | |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: RONYA MCCOOL | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: ronyafmccool@pm.me | ATTENDANCE: Written | | SUBMIT DATE: 2/9/2022 1:53 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |

As a librarian I am familiar with assisting people in obtaining replacement identification and voter registration. The protocols already in place are more than sufficient. Further restricting the right to vote by imposing photo ID requirements via absentee ballot is unnecessary, and would create undue hardships in pursuit of exercising a constitutional right. Voting should be fairly accessed by all Missourians. Thank you for your time and consideration.



MISSOURI HOUSE OF REPRESENTATIVES
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| WITNESS NAME | | | |
| REGISTERED LOBBYIST: | | | |
| WITNESS NAME: SHARON GEUEA JONES | | PHONE NUMBER: 573-808-2156 | |
| REPRESENTING: MO STATE CONFERENCE NAACP; PROMO | | TITLE: | |
| ADDRESS: 910 WEST BROADWAY STREET | | | |
| CITY: COLUMBIA | | STATE: MO | ZIP: 65203 |
| EMAIL: | ATTENDANCE: | SUBMIT DATE: 2/10/2022 12:00 AM | |
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MISSOURI HOUSE OF REPRESENTATIVES
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: SHERRY L BUCHANAN | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: sherryb@joplinlawyers.com | ATTENDANCE: Written | | SUBMIT DATE: 2/9/2022 11:23 AM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |

I oppose HJR 94 for a number of reasons, essentially because it would make voting access more difficult and because there is no significant documented problem of voter impersonation fraud in Missouri. As a former member of the Board of Governors for Missouri Southern State University, I have a specific concern for students who meet voter residency requirements in Missouri and can currently use their student identification cards for voter registration and at the polls. HJR 94 would impose an additional requirement (and perhaps expense) for students in this situation, thereby discouraging participation. There are many other situations where HJR 94 would impose hardships on voters and, because no significant problem with voter impersonation exists in our state, would not make our elections more secure.



MISSOURI HOUSE OF REPRESENTATIVES
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: SUSAN GIBSON | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: Onesuegibson@protonmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/8/2022 9:23 PM |

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This is a shameful effort to get around two Missouri Supreme Court decisions — including one issued in 2020 after the Missouri Constitution was amended to authorize identification at the polls — finding that eliminating non photo forms of ID would be unconstitutional and violate Missourians right to vote.



MISSOURI HOUSE OF REPRESENTATIVES
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: SUSAN LAMMERT | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: susanlammert@att.net | ATTENDANCE: Written | | SUBMIT DATE: 2/9/2022 11:14 AM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |

I am in opposition to raising unnecessary hurdles for voters. There has been virtually no election fraud so why is the Republican Party spending so much time on measures that make it harder to vote when there are so many more urgent issues. I am concerned about where our "democracy" is headed.



MISSOURI HOUSE OF REPRESENTATIVES
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| WITNESS NAME | | | |
| BUSINESS/ORGANIZATION: | | | |
| WITNESS NAME: TORI SCHAFER | | PHONE NUMBER: 314-652-3114 | |
| BUSINESS/ORGANIZATION NAME: AMERICAN CIVIL LIBERTIES UNION OF MISSOURI | | TITLE: | |
| ADDRESS: 906 OLIVE ST | | | |
| CITY: ST. LOUIS | | STATE: MO | ZIP: 63101 |
| EMAIL: tschafer@aclu-mo.org | ATTENDANCE: Written | | SUBMIT DATE: 2/9/2022 12:34 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: VALERIE LARM | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: vrlarm@gmail.com | ATTENDANCE: Written | | SUBMIT DATE: 2/9/2022 9:45 AM |

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I am totally against any legislation that limits people's ability to vote. Limiting voting limits our freedoms.