



MISSOURI HOUSE OF REPRESENTATIVES  
**WITNESS APPEARANCE FORM**

BILL NUMBER: <b>HB 29</b>		DATE: <b>1/27/2021</b>	
COMMITTEE: <b>Pensions</b>			
<b>TESTIFYING:</b> <input type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input checked="" type="checkbox"/> FOR INFORMATIONAL PURPOSES			
<b>WITNESS NAME</b>			
<b>BUSINESS/ORGANIZATION:</b>			
WITNESS NAME: <b>MICHAEL RUFF</b>		PHONE NUMBER: <b>573-751-1280</b>	
BUSINESS/ORGANIZATION NAME: <b>JOINT COMMITTEE ON PUBLIC EMPLOYEE RETIREMENT</b>		TITLE: <b>EXECUTIVE DIRECTOR</b>	
ADDRESS: <b>STATE CAPITOL, ROOM 219-A</b>			
CITY: <b>JEFFERSON CITY</b>		STATE: <b>MO</b>	ZIP: <b>65101</b>
EMAIL:	ATTENDANCE:	SUBMIT DATE: <b>1/27/2021 12:00 AM</b>	
<b>THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.</b>			