

MISSOURI HOUSE OF REPRESENTATIVES WITNESS APPEARANCE FORM

BILL NUMBER: HB 1094				DATE: 3/25/2021	
COMMITTEE: Local Government					
TESTIFYING:	☑ IN SUPPORT OF	☐ IN OPPOSITION TO	☐FOR INFORM	ATIONAL PURPOSES	S
		WITNESS NAME			
BUSINESS/ORGANIZATION:					
WITNESS NAME: ROBERT GUINNESS				PHONE NUMBER: 636-947-7711	
BUSINESS/ORGANIZATION NAME: ST. CHARLES COUNTY CONVENTION & SPORTS FACILITIES AUTHORITY			TITLE: GENERAL	GENERAL COUNSEL	
ADDRESS: 50 HILL POINTE COURT, STE 200					
CITY: ST. CHARLES			STATE: MO	ZIP: 63303	
EMAIL:		ATTENDANCE:		SUBMIT DATE: 3/25/2021 12:00 AM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD LINDER CHAPTER 610, RSMA					



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		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: ARNIE C. "HONEST-ABE" DIENOFF-STATE PUBLIC ADVOCAT PHONE NUM		PHONE NUMB	ER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	TITLE:	
ADDRESS:				
CITY:			STATE:	ZIP:
EMAIL: arniedienoff@yah	oo.com	ATTENDANCE: Written	SUBMIT DATE: 3/25/2021 12:40 AM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.				

I am in Opposition to this Bill. I like that the Governor is making the Appointments to the Convention Authroity witth Full Confirmation of the State Senate. This provides additional Oversight and Additional Transparency!



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		WITNESS NAME		
REGISTERED LOBBYIST:				
WITNESS NAME: JORGEN SCHLEN	MEIER		PHONE NUM	BER:
REPRESENTING: MISSOURI HOTEL LODGING ASSOCIATION TITLE:				
ADDRESS:				
CITY:			STATE:	ZIP:
EMAIL:		ATTENDANCE:	SUBMIT DATE: 3/25/2021 12:00 AM	
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TESTIFYING:	☐ IN SUPPORT OF	☐ IN OPPOSITION TO	FOR INFORM	ATIONAL PURPOSES
		WITNESS NAME		
INDIVIDUAL:				
WITNESS NAME: KELLI ZUG			PHONE NUME	BER:
BUSINESS/ORGANIZATIO	ON NAME:		TITLE:	
ADDRESS:			•	
CITY:			STATE:	ZIP:
EMAIL: kthisgirlsgotit@gr	mail.com	ATTENDANCE: Written	SUBMIT DATE: 3/25/2021 7:48 AM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD LINDER CHAPTER 610, RSMo				

I am curious about the information and legislation being discussed. Thanks, Have a Great Day! Kelli Zug