

MISSOURI HOUSE OF REPRESENTATIVES WITNESS APPEARANCE FORM

BILL NUMBER: HB 1156				DATE: 3/9/2021		
COMMITTEE: Insurance						
TESTIFYING:	✓ IN SUPPORT OF	IN OPPOSITION TO		ATIONAL PURPOSES		
		WITNESS NAME				
REGISTERED LOBBYIST:						
WITNESS NAME: BRANDON KOCH			PHONE NUMBER: 573-893-4241			
REPRESENTING: MISSOURI INSURA	ANCE COALITION	TITLE:				
ADDRESS: 220 E. HIGH STRE	ET					
CITY: JEFFERSON CITY			STATE: MO	ZIP: 65101		
EMAIL:		ATTENDANCE:	SUBMIT DATE: 3/9/2021 12:00 AM			
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.						



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TESTIFYING:	✓ IN SUPPORT OF	IN OPPOSITION TO		FOR INFORMATIONAL PURPOSES		
		WITNESS NAME				
REGISTERED LOBBYIST:						
			PHONE	PHONE NUMBER:		
REPRESENTING: MISSOURI ASSOCIATION OF INSURANCE AGENTS			TITLE:	TITLE:		
ADDRESS: 3315 EMERALD LANE						
			STATE MO		ZIP: 65109	
EMAIL:		ATTENDANCE:		SUBMIT DATE: 3/9/2021 12:00 AM		
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		WITNESS NAME					
INDIVIDUAL:							
WITNESS NAME: ARNIE C. AC "HONEST-ABE" DIENOFF-STATE PUBLIC ADVO				PHONE NUMBER:			
BUSINESS/ORGANIZATION NAME:			TITLE:				
ADDRESS:							
CITY:			STATE:	ZIP:			
EMAIL: arniedienoff@yahoo.com		ATTENDANCE: Written		SUBMIT DATE: 3/9/2021 1:34 AM			
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.							
I am Opposed to t	his Bill						