

MISSOURI HOUSE OF REPRESENTATIVES WITNESS APPEARANCE FORM

BILL NUMBER: HB 388				DATE: 2/17/2021	
COMMITTEE: Ways and Means					
TESTIFYING:	✓ IN SUPPORT OF	✓ IN SUPPORT OF ☐ IN OPPOSITION TO ☐ FOR INFORMATIONAL PURPOSE			
WITNESS NAME					
INDIVIDUAL:					
WITNESS NAME: ARNIE "HONEST-ABE" DIENOFF-STATE PUBLIC ADVOCATE				PHONE NUMBER: 3144409000	
BUSINESS/ORGANIZATION NAME:			TITLE:	TITLE:	
ADDRESS: P.O. BOX #1535					
CITY: O' FALLON			STATE: MO	ZIP: 63366	
EMAIL: ArnieDienoff@Yahoo.Com		ATTENDANCE: Written		SUBMIT DATE: 2/17/2021 1:55 AM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.					
I am in Support of this Bill.The Department of Revenue need to be more pro-active and make the effort to find a Tax-Payer.					