

MISSOURI HOUSE OF REPRESENTATIVES WITNESS APPEARANCE FORM

BILL NUMBER: HB 666				DA ¹ 2/2	TE: 25/2021	
COMMITTEE: Local Government	t			·		
TESTIFYING: IN SUPPORT OF ☐ IN OPPOSITION TO ☐ FO				OR INFORMATIONAL PURPOSES		
WITNESS NAME						
INDIVIDUAL:						
WITNESS NAME: ARNIE C. AC "HONEST-ABE" DIENOFF-STATE PUBLIC ADVO				PHONE NUMBER:		
BUSINESS/ORGANIZATION NAME:			TITLE:	TITLE:		
ADDRESS:						
CITY:			STATE:		ZIP:	
EMAIL: arniedienoff@yahoo.com		ATTENDANCE: Written		SUBMIT DATE: 2/25/2021 12:32 AM		
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.						
I am in Support of this Bill. There needs to be accountability and ensure that there will be no fraud in the City of Saint Louis or the "Senior Citizens Services Fund."						