

MISSOURI HOUSE OF REPRESENTATIVES WITNESS APPEARANCE FORM

| BILL NUMBER: HB 1171 | | | | DATE: 4/19/2023 | | |
|-----------------------------------------------------------------------------|-----------------|------------------------|--------|------------------------------------|--|--|
| COMMITTEE: Budget | | | | | | |
| TESTIFYING: | ✓ IN SUPPORT OF | IN OPPOSITION TO | | FOR INFORMATIONAL PURPOSES | | |
| | | WITNESS NAME | | | | |
| INDIVIDUAL: | | | | | | |
| WITNESS NAME: ARNIE C."HONEST-ABE" DIENOFF-STATE PUBLIC ADVOCATE | | | | PHONE NUMBER: | | |
| BUSINESS/ORGANIZATION NAME: | | | TITLE: | | | |
| ADDRESS: | | | | | | |
| CITY: | | | STATE: | ZIP: | | |
| EMAIL: arniedienoff@yahoo.com | | ATTENDANCE: Written | | SUBMIT DATE: 4/19/2023 11:43 PM | | |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | | | | |
| I am in Support of this Bill and the increases and Prohibitions and Ethics! | | | | | | |



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| TESTIFYING: | ING: ☐IN SUPPORT OF ☐IN OPPOSITION TO 	FOR INFORMATIONAL PURPOS | | | ATIONAL PURPOSES | | |
| | | WITNESS NAME | | | | |
| BUSINESS/ORGANIZATION: | | | | | | |
| WITNESS NAME: LESTER ELDER | | | PHONE NUMBER: 573-526-7751 | | | |
| BUSINESS/ORGANIZATION NAME: MISSOURI LOTTERY | | | TITLE: EXECUTIVE DIRECTOR | | | |
| ADDRESS: 1823 SOUTHRIDGE DR | | | | | | |
| | , | STATE: MO | ZIP: 65102 | | | |
| EMAIL: | | ATTENDANCE: | SUBMIT DATE: 4/19/2023 12:00 AM | | | |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | | | | |