



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | |
|--|-------------------------------|---|
| BILL NUMBER: HB 212 | | DATE: 2/14/2023 |
| COMMITTEE: Special Committee on Tourism | | |
| TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> 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: 2/14/2023 11:56 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | |



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| WITNESS NAME | | |
| INDIVIDUAL: | | |
| WITNESS NAME: ASHLEY I. COLE | | PHONE NUMBER: |
| BUSINESS/ORGANIZATION NAME: | | TITLE: |
| ADDRESS: | | |
| CITY: | | STATE: ZIP: |
| EMAIL: | ATTENDANCE: | SUBMIT DATE: 2/14/2023 12:00 AM |
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: CRYSTAL WIGGINS | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: ELIZABETH HERRERA | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
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| WITNESS NAME | | | |
| BUSINESS/ORGANIZATION: | | | |
| WITNESS NAME: HEATHER JAVERSAK | | PHONE NUMBER: 573-694-4177 | |
| BUSINESS/ORGANIZATION NAME: MISSOURI NATIONAL GUARD ASSOCIATION | | TITLE: CSM 203RD ENGINEER BAT OP SERGEANT MAJOR 35TH ENGI | |
| ADDRESS: 2302 MILITIA DRIVE | | | |
| CITY: JEFFERSON CITY | | STATE: MO | ZIP: 65101 |
| EMAIL: | ATTENDANCE: | SUBMIT DATE: 2/14/2023 12:00 AM | |
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| WITNESS NAME | | | |
| INDIVIDUAL: | | | |
| WITNESS NAME: ROBYN "STARLETTA" CATHCART | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
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