



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 968		DATE: 4/4/2023
COMMITTEE: Financial Institutions		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
REGISTERED LOBBYIST:		
WITNESS NAME: DAVID KENT		PHONE NUMBER:
REPRESENTING: MISSOURI BANKERS ASSOCIATION		TITLE:
ADDRESS: 207 EAST CAPITOL AVE.		
CITY: JEFFERSON CITY		STATE: MO
		ZIP: 65101
EMAIL:	ATTENDANCE:	SUBMIT DATE: 4/4/2023 12:00 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		



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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: JACQUE BARDGETT		PHONE NUMBER: 573-634-8760	
REPRESENTING: ASSOCIATED CEMETERIES OF MISSOURI		TITLE:	
ADDRESS: 205 E. CAPITOL AVE. STE 100			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101
EMAIL:	ATTENDANCE:	SUBMIT DATE: 4/4/2023 12:00 AM	
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WITNESS NAME		
BUSINESS/ORGANIZATION:		
WITNESS NAME: MICHAEL E. MAGLIARI		PHONE NUMBER: 573-659-2280
BUSINESS/ORGANIZATION NAME: THE MISSOURI BAR		TITLE:
ADDRESS: 326 MONROE STREET		
CITY: JEFFERSON CITY		STATE: MO
		ZIP: 65101
EMAIL: govrel@mobar.org	ATTENDANCE: In-Person	SUBMIT DATE: 3/25/2023 9:34 PM
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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: MICHAEL E. MAGLIARI		PHONE NUMBER: 573-638-2232	
BUSINESS/ORGANIZATION NAME: THE MISSOURI BAR		TITLE:	
ADDRESS: 326 MONROE ST.			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101
EMAIL: govrel@mobar.org	ATTENDANCE: In-Person	SUBMIT DATE: 4/3/2023 11:40 AM	
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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: 4/4/2023 11:39 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

I Oppose this Act.