



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1553		DATE: 2/28/2024	
COMMITTEE: Government Efficiency and Downsizing			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: DAVID KELLY		PHONE NUMBER: 573-751-8459	
BUSINESS/ORGANIZATION NAME: DEPARTMENT OF NATURAL RESOURCES-DIVISION OF STATE PARKS		TITLE: DIRECTOR	
ADDRESS: PO BOX 176			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65102
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/28/2024 12:00 AM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			



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WITNESS NAME		
BUSINESS/ORGANIZATION:		
WITNESS NAME: KENDRA VARNS WALLIS		PHONE NUMBER: 816-210-3413
BUSINESS/ORGANIZATION NAME: MISSOURI PARKS ASSOCIATION		TITLE: EXECUTIVE DIRECTOR
ADDRESS: PO BOX 8531		
CITY: KANSAS CITY		STATE: MO
		ZIP: 64114
EMAIL: kendra.wallis@missouriparks.org	ATTENDANCE: Written	SUBMIT DATE: 2/27/2024 9:49 AM

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Missouri Parks Association is in support of HB 1553. As a statewide advocate for Missouri State Parks and Historic Sites, our organization supports legislation to protect customer information for visitors who make a camping, lodging, or shelter reservation for a Missouri State Park or State Historic Site. On behalf of the almost 3,000 members of Missouri Parks Association who enjoy and invest in Missouri and the more than 18 million visitors annually, we support HB 1553 to protect the visitors the Missouri State Park system.



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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: KYNA IMAN		PHONE NUMBER: 314-651-1185	
REPRESENTING: CONSERVATION FEDERATION OF MISSOURI, MISSOURI PARK & RECREATION ASSOCIATION		TITLE:	
ADDRESS: P.O. BOX 1483			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/28/2024 12:00 AM	
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WITNESS NAME		
BUSINESS/ORGANIZATION:		
WITNESS NAME: TJ GRAVEN		PHONE NUMBER: 573-690-4525
BUSINESS/ORGANIZATION NAME: MISSOURI DEPARTMENT OF NATURAL RESOURCES		TITLE: LIAISON
ADDRESS: PO BOX 176		
CITY: JEFFERSON CITY		STATE: MO
		ZIP: 65102
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/28/2024 12:00 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: 2/28/2024 12:08 AM
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I am Opposed to this Change to Records and Documents as Maintained by the Missouri Department of Parks and Conservation.