

## MISSOURI HOUSE OF REPRESENTATIVES WITNESS APPEARANCE FORM

| BILL NUMBER:<br>HB 2526   |  |                        |       | DA<br>3/1                          | TE:<br>2/2024 |  |  |  |
|---|--|------------------------|-------|------------------------------------|---------------|--|--|--|
| COMMITTEE:<br>Financial Institutions  |  |                        |       |                                    |               |  |  |  |
| TESTIFYING:   | TESTIFYING: ☑IN SUPPORT OF ☐IN OPPOSITION TO ☐FOR INFO |                        |       | ORMATIC                            | NAL PURPOSES  |  |  |  |
|   |  | WITNESS NAME           |       |                                    |               |  |  |  |
| INDIVIDUAL:   |  |                        |       |                                    |               |  |  |  |
| WITNESS NAME:<br>ARNIE C."HONEST-ABE" DIENOFF-STATE PUBLIC ADVOCATE   |  |                        |       | PHONE NUMBER:                      |               |  |  |  |
| BUSINESS/ORGANIZATION NAME:   |  |                        |       | TITLE:                             |               |  |  |  |
| ADDRESS:  |  |                        |       |                                    |               |  |  |  |
| CITY:   |  |                        | STATE | i:                                 | ZIP:          |  |  |  |
| EMAIL:<br>arniedienoff@yahoo.com  |  | ATTENDANCE:<br>Written |       | SUBMIT DATE:<br>3/12/2024 11:54 PM |               |  |  |  |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.  |  |                        |       |                                    |               |  |  |  |
| I am in Support of this Bill and it goal. This common-sense Legislation and good Banking Principals,<br>Rules and Policy. |  |                        |       |                                    |               |  |  |  |



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|---|-----------------|------------------------|----------------------------|------------------------------------|--|--|--|
| COMMITTEE:<br>Financial Institutions  |                 |                        |                            |                                    |  |  |  |
| TESTIFYING:   | ✓ IN SUPPORT OF | IN OPPOSITION TO       | FOR INFORMATIONAL PURPOSES |                                    |  |  |  |
|   |                 | WITNESS NAME           |                            |                                    |  |  |  |
| REGISTERED LOBBYIST:  |                 |                        |                            |                                    |  |  |  |
| WITNESS NAME:<br>DAVID KENT   |                 |                        |                            | PHONE NUMBER:                      |  |  |  |
| REPRESENTING:<br>MISSOURI BANKE   | RS ASSOCIATION  | TITLE:                 |                            |                                    |  |  |  |
| ADDRESS:<br>207 E CAPITOL AVE   |                 |                        |                            |                                    |  |  |  |
| CITY:<br>JEFFERSON CITY   |                 |                        | STATE:<br><b>MO</b>        | ZIP:<br>65203                      |  |  |  |
| EMAIL:<br>dkent@mobankers   | s.com           | ATTENDANCE:<br>Written |                            | SUBMIT DATE:<br>3/12/2024 10:03 AM |  |  |  |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.                              |                 |                        |                            |                                    |  |  |  |
| MBA supports HB 2526, and thanks the Missouri Municipal League for the opportunity to provide input |                 |                        |                            |                                    |  |  |  |

MBA supports HB 2526, and thanks the Missouri Municipal League for the opportunity to provide input on this legislation ahead of session.



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|--|-----------------|------------------|------------------------------------|---------------------------|--|--|--|
| COMMITTEE:<br>Financial Institutions                                   |                 |                  |                                    |                           |  |  |  |
| TESTIFYING:  | ✓ IN SUPPORT OF | IN OPPOSITION TO | FOR INFORMATIONAL PURPOSES         |                           |  |  |  |
|  |                 | WITNESS NAME     |                                    |                           |  |  |  |
| BUSINESS/ORGANIZATION:   |                 |                  |                                    |                           |  |  |  |
|  |                 |                  | PHONE NUMBER: 573-635-9134         |                           |  |  |  |
| BUSINESS/ORGANIZATIO   |                 | TITLE:           |                                    |                           |  |  |  |
| ADDRESS:<br>1727 SOUTHRIDGE DRIVE                                      |                 |                  |                                    |                           |  |  |  |
| CITY:<br>JEFFERSON CITY  |                 |                  | STATE:<br>MO                       | ZIP:<br>65109             |  |  |  |
| EMAIL:   |                 | ATTENDANCE:      | SUBMIT DATE:<br>3/12/2024 12:00 AM |                           |  |  |  |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. |                 |                  |                                    |                           |  |  |  |