



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------|--|----------------------|
| BILL NUMBER: HJR 97 | | DATE: 4/9/2024 | |
| COMMITTEE: Special Committee on Government Accountability | | | |
| 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: BEN TRAVLOS | | PHONE NUMBER: 573-893-1400 | |
| REPRESENTING: MO FARM BUREAU | | TITLE: | |
| ADDRESS: 701 S. COUNTRY CLUB DR. | | | |
| CITY: JEFFERSON CITY | | STATE: MO | ZIP: 65109 |
| EMAIL: | ATTENDANCE: | SUBMIT DATE: 4/9/2024 12:00 AM | |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------|--|------|
| BILL NUMBER: HJR 97 | | DATE: 4/9/2024 | |
| COMMITTEE: Special Committee on Government Accountability | | | |
| 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: BRADLEY LOVELESS | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: | ATTENDANCE: | SUBMIT DATE: 4/9/2024 12:00 AM | |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------|--|------|
| BILL NUMBER: HJR 97 | | DATE: 4/9/2024 | |
| COMMITTEE: Special Committee on Government Accountability | | | |
| 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: HERMAN KELLY | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: | ATTENDANCE: | SUBMIT DATE: 4/9/2024 12:00 AM | |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------|--|------|
| BILL NUMBER: HJR 97 | | DATE: 4/9/2024 | |
| COMMITTEE: Special Committee on Government Accountability | | | |
| 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: LEON MICHEL | | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | TITLE: | |
| ADDRESS: | | | |
| CITY: | | STATE: | ZIP: |
| EMAIL: | ATTENDANCE: | SUBMIT DATE: 4/9/2024 12:00 AM | |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------|--|----------------------|
| BILL NUMBER: HJR 97 | | DATE: 4/9/2024 | |
| COMMITTEE: Special Committee on Government Accountability | | | |
| 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: SCOTT LONG | | PHONE NUMBER: 417-967-3222 | |
| BUSINESS/ORGANIZATION NAME: TEXAS COUNTY | | TITLE: PRESIDING COMMISSIONER | |
| ADDRESS: 310 N. GRAND | | | |
| CITY: HOUSTON | | STATE: MO | ZIP: 65483 |
| EMAIL: | ATTENDANCE: | SUBMIT DATE: 4/9/2024 12:00 AM | |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------|---|----------------------|
| BILL NUMBER: HJR 97 | | DATE: 4/9/2024 | |
| COMMITTEE: Special Committee on Government Accountability | | | |
| 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: ZACH WILLIAMS, PRESIDING COMM. | | PHONE NUMBER: 417-926-2665 | |
| BUSINESS/ORGANIZATION NAME: WRIGHT COUNTY | | TITLE: PRESIDENT COUNTY COMM. ASSN. | |
| ADDRESS: P.O. BOX 98 | | | |
| CITY: HARTSVILLE | | STATE: MO | ZIP: 65667 |
| EMAIL: | ATTENDANCE: | SUBMIT DATE: 4/9/2024 12:00 AM | |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | |



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | |
|--|---------------------------------|--|
| BILL NUMBER: HJR 97 | | DATE: 4/9/2024 |
| COMMITTEE: Special Committee on Government Accountability | | |
| TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" 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@mail.com | ATTENDANCE: In-Person | SUBMIT DATE: 4/9/2024 11:40 PM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | |

I am Opposed to this House Joint Resolution and taking away the purpose of the 1/8th State Sales Tax for Land Conservation and State Parks.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | | |
|--|-------------|--|----------------------|
| BILL NUMBER: HJR 97 | | DATE: 4/9/2024 | |
| COMMITTEE: Special Committee on Government Accountability | | | |
| TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES | | | |
| WITNESS NAME | | | |
| BUSINESS/ORGANIZATION: | | | |
| WITNESS NAME: STEVE JONES | | PHONE NUMBER: 314-420-8087 | |
| BUSINESS/ORGANIZATION NAME: CONSERVATION FEDERATION OF MO | | TITLE: VICE PRESIDENT | |
| ADDRESS: 31273 N. HICKORY LICK RD. | | | |
| CITY: WARRENTON | | STATE: MO | ZIP: 63383 |
| EMAIL: | ATTENDANCE: | SUBMIT DATE: 4/9/2024 12:00 AM | |

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

| | | |
|--|-------------|--|
| BILL NUMBER: HJR 97 | | DATE: 4/9/2024 |
| COMMITTEE: Special Committee on Government Accountability | | |
| TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input checked="" type="checkbox"/> FOR INFORMATIONAL PURPOSES | | |
| WITNESS NAME | | |
| BUSINESS/ORGANIZATION: | | |
| WITNESS NAME: AARON JEFFRIES | | PHONE NUMBER: 573-751-4115 |
| BUSINESS/ORGANIZATION NAME: MISSOURI DEPARTMENT OF CONSERVATION | | TITLE: DEPUTY DIRECTOR |
| ADDRESS: PO BOX 180 | | |
| CITY: JEFFERSON CITY | | STATE: MO |
| | | ZIP: 65102 |
| EMAIL: | ATTENDANCE: | SUBMIT DATE: 4/9/2024 12:00 AM |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | |