



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: SB 900		DATE: 4/17/2024	
COMMITTEE: Corrections and Public Institutions			
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. AC "HONEST-ABE" DIENOFF-STATE PUBLIC ADVO		PHONE NUMBER: 314-440-9000	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY: O'FALLON		STATE: MO	ZIP: 63366
EMAIL:	ATTENDANCE:		SUBMIT DATE: 4/17/2024 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: CHASE CAMPBELL		PHONE NUMBER: 573-864-0972	
REPRESENTING: ST. LOUIS COUNTY		TITLE:	
ADDRESS: 124 E HIGH ST			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65102
EMAIL:	ATTENDANCE:	SUBMIT DATE: 4/17/2024 12:00 AM	
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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: JAMES HARRIS		PHONE NUMBER: 573-761-7875	
REPRESENTING: LJ HART & COMPANY		TITLE:	
ADDRESS: 122 EAST HIGH STREET, SUITE 200			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101
EMAIL:	ATTENDANCE:	SUBMIT DATE: 4/17/2024 12:00 AM	
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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: TRENT WATSON		PHONE NUMBER: 314-606-0141	
REPRESENTING: MO ASSN OF COUNTIES		TITLE:	
ADDRESS: PO BOX 2221			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65102
EMAIL:	ATTENDANCE:	SUBMIT DATE: 4/17/2024 12:00 AM	
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