



MISSOURI HOUSE OF REPRESENTATIVES  
**WITNESS APPEARANCE FORM**

BILL NUMBER: <b>HB 1049</b>		DATE: <b>2/12/2025</b>	
COMMITTEE: <b>Financial Institutions</b>			
<b>TESTIFYING:</b> <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
<b>WITNESS NAME</b>			
<b>REGISTERED LOBBYIST:</b>			
WITNESS NAME: <b>CHARLES ANDY ARNOLD</b>		PHONE NUMBER: <b>314-971-1000</b>	
REPRESENTING: <b>MISSOURI INDEPENDENT BANKERS ASSOCIATION</b>		TITLE: <b>LOBBYIST</b>	
ADDRESS: <b>P. O. BOX 161</b>			
CITY: <b>WRIGHT CITY</b>		STATE: <b>MO</b>	ZIP: <b>63390</b>
EMAIL: <b>caarnold@arnoldlobby.com</b>	ATTENDANCE: <b>In-Person</b>		SUBMIT DATE: <b>2/10/2025 11:11 PM</b>
<b>THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.</b>			

**Creates a system to protect banking customers from fraud by a allowing a customer to designate a trusted contact to verify a customers actions**



MISSOURI HOUSE OF REPRESENTATIVES  
**WITNESS APPEARANCE FORM**

BILL NUMBER: <b>HB 1049</b>		DATE: <b>2/12/2025</b>	
COMMITTEE: <b>Financial Institutions</b>			
<b>TESTIFYING:</b> <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
<b>WITNESS NAME</b>			
<b>REGISTERED LOBBYIST:</b>			
WITNESS NAME: <b>EMILY LEWIS</b>		PHONE NUMBER: <b>573-636-8151</b>	
REPRESENTING: <b>MISSOURI BANKERS ASSOCIATION</b>		TITLE:	
ADDRESS: <b>PO BOX 57</b>			
CITY: <b>JEFFERSON CITY</b>		STATE: <b>MO</b>	ZIP: <b>65102</b>
EMAIL:	ATTENDANCE:	SUBMIT DATE: <b>2/11/2025 12:00 AM</b>	
<b>THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.</b>			



MISSOURI HOUSE OF REPRESENTATIVES  
**WITNESS APPEARANCE FORM**

BILL NUMBER: <b>HB 1049</b>		DATE: <b>2/12/2025</b>	
COMMITTEE: <b>Financial Institutions</b>			
<b>TESTIFYING:</b> <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
<b>WITNESS NAME</b>			
<b>REGISTERED LOBBYIST:</b>			
WITNESS NAME: <b>RAY BOZARTH</b>		PHONE NUMBER: <b>573-999-6636</b>	
REPRESENTING: <b>MO CREDIT UNION ASSOCIATION</b>		TITLE:	
ADDRESS: <b>223 MADISON</b>			
CITY: <b>JEFFERSON CITY</b>		STATE: <b>MO</b>	ZIP: <b>65101</b>
EMAIL:	ATTENDANCE:	SUBMIT DATE: <b>2/11/2025 12:00 AM</b>	
<b>THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.</b>			



MISSOURI HOUSE OF REPRESENTATIVES  
**WITNESS APPEARANCE FORM**

BILL NUMBER: <b>HB 1049</b>		DATE: <b>2/12/2025</b>	
COMMITTEE: <b>Financial Institutions</b>			
<b>TESTIFYING:</b> <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
<b>WITNESS NAME</b>			
<b>INDIVIDUAL:</b>			
WITNESS NAME: <b>ARNIE C."HONEST-ABE" DIENOFF-STATE PUBLIC ADVOCATE</b>		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: <b>arniedienoff@yahoo.com</b>		ATTENDANCE: <b>In-Person</b>	SUBMIT DATE: <b>2/11/2025 11:54 PM</b>
<b>THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.</b>			



MISSOURI HOUSE OF REPRESENTATIVES  
**WITNESS APPEARANCE FORM**

BILL NUMBER: <b>HB 1049</b>		DATE: <b>2/12/2025</b>	
COMMITTEE: <b>Financial Institutions</b>			
<b>TESTIFYING:</b> <input type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input checked="" type="checkbox"/> FOR INFORMATIONAL PURPOSES			
<b>WITNESS NAME</b>			
<b>BUSINESS/ORGANIZATION:</b>			
WITNESS NAME: <b>MICHAEL O'DONNELL</b>		PHONE NUMBER: <b>573-616-7194</b>	
BUSINESS/ORGANIZATION NAME: <b>MISSOURI SECURITIES DIVISION</b>		TITLE: <b>SECURITIES COMMISSIONER</b>	
ADDRESS: <b>600 WEST MAIN ST. ROOM 229</b>			
CITY: <b>JEFFERSON CITY</b>		STATE: <b>MO</b>	ZIP: <b>65101</b>
EMAIL:	ATTENDANCE:	SUBMIT DATE: <b>2/11/2025 12:00 AM</b>	
<b>THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.</b>			