

BILL NUMBER: HB 1168				DATE: 3/4/2025
COMMITTEE: Economic Develop	oment			
TESTIFYING:	✓ IN SUPPORT OF	IN OPPOSITION TO		ATIONAL PURPOSES
		WITNESS NAME		
REGISTERED LO	OBBYIST:			
WITNESS NAME: BRAD JONES			PHONE NUMB 573-619-30	
REPRESENTING:			TITLE:	
ADDRESS: 308 E. HIGH				
CITY: JEFFERSON CITY			STATE: MO	ZIP: 65101
EMAIL: Brad.Jones@nfib.o	Jones@nfib.org ATTENDANCE: SUBMIT DATE: 3/2/2025 6:44 PM			
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.				



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		WITNESS NAME		
REGISTERED LO	DBBYIST:			
WITNESS NAME: BRENT HEMPHILL			PHONE NUME	BER:
REPRESENTING: PORT KC			TITLE: LOBBYIS	г
ADDRESS: PO BOX 156				
CITY: JEFFERSON CITY			STATE: MO	ZIP: 65101
EMAIL:		ATTENDANCE:	SUBMIT DATE: 3/4/2025 12:00 AM	
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		WITNESS NAME			
	OBBYIST:				
WITNESS NAME: CADE TREMAIN			PHONE NUME 573-634-3		
REPRESENTING: MISSOURI CHAMBER OF COMMERCE AND INDUSTRY			TITLE: LOBBYIS	TITLE: LOBBYIST	
ADDRESS: 428 EAST CAPITOL AVENUE					
CITY: JEFFERSON CITY			STATE: MO	ZIP: 65101	
EMAIL:		ATTENDANCE:	SUBMIT DATE: 3/4/2025 12:00 AM		
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		WITNESS NAME			
REGISTERED LO	OBBYIST:				
WITNESS NAME: KATE CASAS			PHONE NUMB 314-809-50		
REPRESENTING: MISSOURI ECONOMIC DEVELOPMENT COUNCIL			TITLE: LOBBYIST	TITLE: LOBBYIST	
ADDRESS: 117 MADISON					
CITY: JEFFERSON CITY			STATE: MO	ZIP: 65108	
EMAIL:		ATTENDANCE:		SUBMIT DATE: 3/4/2025 12:00 AM	
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		WITNESS NAME		
REGISTERED LO	OBBYIST:			
WITNESS NAME: LAURA HOLLOWA	AY		PHONE NUME 573-635-9	
REPRESENTING: MISSOURI MUNICIPAL LEAGUE			TITLE: LOBBYIST	
ADDRESS: 3305 DANE CIRCLE				
CITY: JEFFERSON CITY			STATE: MO	ZIP: 65109
EMAIL:		ATTENDANCE:	SUBMIT DATE: 3/4/2025 12:00 AM	
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TESTIFYING:	✓ IN SUPPORT OF	IN OPPOSITION TO		ATIONAL PURPOSES
		WITNESS NAME		
BUSINESS/ORG	ANIZATION:			
WITNESS NAME: MICHELLE HATAV	VAY		PHONE NUME 573-694-7	
BUSINESS/ORGANIZATION NAME: MISSOURI DEPARTMENT OF ECONOMIC DEVELOPMENT				
ADDRESS: 301 WEST HIGH STREET				
CITY: JEFFERSON CITY			STATE: MO	ZIP: 65109
EMAIL:		ATTENDANCE:	SUBMIT DATE: 3/4/2025 12:00 AM	
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		WITNESS NAME			
INDIVIDUAL:					
WITNESS NAME: PHONE NUM ARNIE C."HONEST-ABE" DIENOFF-STATE PUBLIC ADVOCATE				/BER:	
BUSINESS/ORGANIZATION NAME:			TITLE:	TITLE:	
ADDRESS:					
CITY:			STATE:	ZIP:	
EMAIL: arniedienoff@yahoo.com		ATTENDANCE: In-Person		SUBMIT DATE: 3/4/2025 11:27 PM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.					
I am Opposed to this Bill and offering yet another greedy incentive or Corporate Welfare, with little to no Return-On-Investment.					