

MISSOURI HOUSE OF REPRESENTATIVES WITNESS APPEARANCE FORM

BILL NUMBER: HB 247				DAT 1/2	E: 8/2025	
COMMITTEE: Government Efficiency						
TESTIFYING:	ING: ☑IN SUPPORT OF ☐IN OPPOSITION TO ☐FOR INFORMATIONAL PURPOSE					
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@yahoo.com		ATTENDANCE: In-Person		SUBMIT DATE: 1/28/2025 11:54 PM		
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.						