

MISSOURI HOUSE OF REPRESENTATIVES WITNESS APPEARANCE FORM

| BILL NUMBER: HB 388 | | | | DATE: 2/19/2025 | |
|---|------------------|--------------------|-----------------------------------|---------------------------|--|
| COMMITTEE: Local Government | | | • | | |
| TESTIFYING: | ✓ IN SUPPORT OF | ☐ IN OPPOSITION TO | ☐FOR INFORM | ATIONAL PURPOSES | |
| | | WITNESS NAME | | | |
| REGISTERED LO | DBBYIST: | | | | |
| WITNESS NAME: ANGELA SCHULTE | | | PHONE NUMBER: 573-680-0255 | | |
| REPRESENTING: TITLE: MISSOURI COUNTY COLLECTORS ASSOCIATION | | | | | |
| ADDRESS: PO BOX 1108 | | | | | |
| CITY: JEFFERSON CITY | | | STATE: MO | ZIP: 65101 | |
| EMAIL: | | ATTENDANCE: | SUBMIT DATE: 2/19/2025 12:00 AM | | |
| THE INFORMAT | TION ON THIS FOR | M IS PUBLIC RECOR | D UNDER CHA | PTER 610. RSMo. | |



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| | | WITNESS NAME | | | | |
| INDIVIDUAL: | | | | | | |
| WITNESS NAME: ARNIE C."HONEST-ABE" DIENOFF-STATE PUBLIC ADVOCATE | | | PHONE NUME | PHONE NUMBER: | | |
| BUSINESS/ORGANIZATION NAME: | | | TITLE: | | | |
| ADDRESS: | | | <u> </u> | | | |
| CITY: | | | STATE: | ZIP: | | |
| EMAIL: arniedienoff@yaho | oo.com | ATTENDANCE: Written | SUBMIT DATE: 2/19/2025 11:38 PM | | | |
| THE INFORMATION ON THIS FORM IS BURLLO BECORD LINDER CHARTER 610, DSMo | | | | | | |

I am in Support of this Legislation and Bill to allow Residents of Township Counties to make Payments on their Real Estate and Personal Property Taxes through their Account with the County Collector of Revenue. This makes sense, is reasonable and is good Public Policy.