



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 968		DATE: 2/26/2025	
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			
REGISTERED LOBBYIST:			
WITNESS NAME: ANDREW ARNOLD		PHONE NUMBER: 314-541-6936	
REPRESENTING: MISSOURI INDEPENDENT BANKERS ASSOCIATION		TITLE: LOBBYIST	
ADDRESS: PO BOX 161			
CITY: WRIGHT CITY		STATE: MO	ZIP: 63390
EMAIL: andrew@arnoldlobby.com	ATTENDANCE: Written		SUBMIT DATE: 2/26/2025 3:09 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			
The Missouri Independent Bankers Association supports this legislation.			



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 968		DATE: 2/26/2025	
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			
REGISTERED LOBBYIST:			
WITNESS NAME: CHARLES ANDY ARNOLD		PHONE NUMBER: 314-971-1000	
REPRESENTING: MIBA		TITLE:	
ADDRESS: P. O. BOX 161			
CITY: WRIGHT CITY		STATE: MO	ZIP: 63390
EMAIL: Caarnold@arnoldlobby.com	ATTENDANCE: Written		SUBMIT DATE: 2/26/2025 3:57 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			
Support the bill			



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 968		DATE: 2/26/2025	
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			
BUSINESS/ORGANIZATION:			
WITNESS NAME: VIVEK MALEK		PHONE NUMBER: 573-751-2411	
BUSINESS/ORGANIZATION NAME: MO TREASURER's OFFICE		TITLE: STATE TREASURER	
ADDRESS: P.O. BOX 210			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65102
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/26/2025 12:00 AM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 968		DATE: 2/26/2025	
COMMITTEE: Corrections and Public Institutions			
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: ARNIE C. AC "HONEST-ABE" DIENOFF		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL:	ATTENDANCE:		SUBMIT DATE: 2/26/2025 12:00 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			