

MISSOURI HOUSE OF REPRESENTATIVES WITNESS APPEARANCE FORM

BILL NUMBER: SB 61				DATE: 4/30/2025	
COMMITTEE: Professional Registration and Licensing					
TESTIFYING:	✓ IN SUPPORT OF	☐ IN OPPOSITION TO		ATIONAL PURPOSES	
		WITNESS NAME			
REGISTERED LOBBYIST:					
WITNESS NAME: JAMES HARRIS			PHONE NUME 573-761-7		
REPRESENTING: FGA ACTION			TITLE:		
ADDRESS: 122 EAST HIGH STREET, SUITE 200					
CITY: JEFFERSON CITY			STATE: MO	ZIP: 65101	
EMAIL:		ATTENDANCE:	SUBMIT DATE: 4/30/2025 12:00 AM		
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.					



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COMMITTEE: Professional Registration and Licensing					
TESTIFYING: VIN SUPF	PORT OF IN OPPOSITION	ON TO FOR INFORM	MATIONAL PURPOSES		
	WITNESS NAM	IE .			
REGISTERED LOBBYIST:					
WITNESS NAME: MEAGAN HOWERTON			PHONE NUMBER: 573-418-7616		
REPRESENTING: MO SPEECH-LANGUAGE HEA	RING ASSN.	TITLE:			
ADDRESS: PO BOX 156					
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101		
EMAIL:	ATTENDANCE:		SUBMIT DATE: 4/30/2025 12:00 AM		
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		WITNESS NAME			
REGISTERED LOBBYIST:					
WITNESS NAME: SARAH MARTIN			PHONE NUME 573-239-0		
REPRESENTING: INDEPENDENT PA	YROLL PROVIDERS		TITLE:		
ADDRESS: 3841 HOLLY HILLS BLVD					
CITY: ST. LOUIS			STATE: MO	ZIP: 63116	
EMAIL:		ATTENDANCE:	SUBMIT DATE: 4/30/2025 12:00 AM		
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	WITNESS NAME				
INDIVIDUAL:					
WITNESS NAME: ARNIE C."HONEST-ABE" DIENOFF-STATE PUBLIC ADVOCATE			ER:		
BUSINESS/ORGANIZATION NAME:	TITLE:	TITLE:			
ADDRESS:					
CITY:		STATE:	ZIP:		
EMAIL: arniedienoff@yahoo.com	ATTENDANCE: In-Person	SUBMIT DATE: 4/30/2025 11:42 PM			
THE INFORMATION ON THIS FORM IS PUBLIC RECORD LINDER CHAPTER 610, RSMo					

I am opposed to this Bill by cutting corners and accepting Professional Licenses from other States by not Meeting Our State's Criteria and Promulgated Rules and Regulations. These cutting corners is short changing Missourians and jeopardizing the Safety of Our State's Residents. Defeat this Bill!