



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: SB 81		DATE: 3/12/2025	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
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: 3/12/2025 11:56 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			



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WITNESS NAME		
REGISTERED LOBBYIST:		
WITNESS NAME: HEATH CLARKSTON		PHONE NUMBER: 573-520-7490
REPRESENTING: MISSOURI FIREWORKS ASSOCIATION		TITLE:
ADDRESS: 235 EAST HIGH STREET, SUITE 301		
CITY: JEFFERSON CITY		STATE: MO
		ZIP: 65101
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/12/2025 12:00 AM
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WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: JOHN WALKER		PHONE NUMBER: 573-447-1776	
BUSINESS/ORGANIZATION NAME: SPIRIT OF '76 FIREWORKS		TITLE: VICE PRESIDENT	
ADDRESS: 6401 HWY 40 W			
CITY: COLUMBIA		STATE: MO	ZIP: 65202
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/12/2025 12:00 AM	
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