



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 2098		DATE: 1/12/2026
COMMITTEE: Ways and Means		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
BUSINESS/ORGANIZATION:		
WITNESS NAME: JEFF PORTER		PHONE NUMBER: 573-289-8318
BUSINESS/ORGANIZATION NAME: MO STATE ASSESSOR's ASSN.		TITLE: ASSESSOR
ADDRESS: COURTHOUSE		
CITY: MONTGOMERY CITY		STATE: MO ZIP: 63361
EMAIL:	ATTENDANCE:	SUBMIT DATE: 1/12/2026 12:00 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		



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WITNESS NAME		
BUSINESS/ORGANIZATION:		
WITNESS NAME: KENNY MOHR	PHONE NUMBER: 573-819-2258	
BUSINESS/ORGANIZATION NAME: MISSOURI STATE ASSESSOR's ASSN.	TITLE: ASSESSOR	
ADDRESS: 801 E. WALNUT ST.		
CITY: COLUMBIA	STATE: MO	ZIP: 65201
EMAIL:	ATTENDANCE:	SUBMIT DATE: 1/12/2026 12:00 AM
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