



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 2163		DATE: 2/14/2022	
COMMITTEE: General Laws			
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. AC DIENOFF-STATE PUBLIC ADVOCATE		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: arniedienoff@yahoo.com		ATTENDANCE: Written	SUBMIT DATE: 2/14/2022 11:39 PM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

I Support This Bill and Legislation. It is Just Makes Common-Sense when Life-Circumstances Occur and Can Get Messy!



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WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: KIMBERLY ELIAS		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: kim_elias@att.net	ATTENDANCE: Written		SUBMIT DATE: 2/11/2022 6:22 AM
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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: SAM LICKLIDER		PHONE NUMBER:	
REPRESENTING: MISSOURI FUNERAL DIRECTORS		TITLE:	
ADDRESS: PO BOX 1302			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65102
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/14/2022 12:00 AM	
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