



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 441		DATE: 1/28/2021	
COMMITTEE: Local Government			
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: RICHARD SHEETS		PHONE NUMBER: 573-635-9134	
REPRESENTING: MISSOURI MUNICIPAL LEAGUE		TITLE:	
ADDRESS: 1727 SOUTH RIDGE DRIVE			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65109
EMAIL:	ATTENDANCE:	SUBMIT DATE: 1/28/2021 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: SAMANTHA GREEN		PHONE NUMBER: 573-522-9078	
BUSINESS/ORGANIZATION NAME: STATE AUDITOR's OFFICE		TITLE: LEGISLATIVE LIASION	
ADDRESS: 880 TRUMAN BUILDING			
CITY: JEFFERSON CITY		STATE: MO	ZIP:
EMAIL:	ATTENDANCE:	SUBMIT DATE: 1/28/2021 12:00 AM	
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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: SHANNON COOPER		PHONE NUMBER: 660-890-1432	
REPRESENTING: CITY OF KANSAS CITY		TITLE:	
ADDRESS: 208 MADISON			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 64735
EMAIL:	ATTENDANCE:	SUBMIT DATE: 1/28/2021 12:00 AM	
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