



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 481		DATE: 3/3/2021	
COMMITTEE: Professional Registration and Licensing			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: CURTIS L. GOBEN		PHONE NUMBER: 573-619-0969	
BUSINESS/ORGANIZATION NAME: AMERICAN INSTITUTE OF ARCHITECTS OF MISSOURI		TITLE: ARCHITECT	
ADDRESS: PO BOX 480644			
CITY: KANSAS CITY		STATE: MO	ZIP: 64145
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/3/2021 12:00 AM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			



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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: KATHI HARNESS		PHONE NUMBER: 573-634-5200	
REPRESENTING: AMERICAN INSTITUTE OF ARCHITECTS OF MISSOURI		TITLE:	
ADDRESS: PO BOX 2302			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65102
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/3/2021 12:00 AM	
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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: MARK RHOADS		PHONE NUMBER: 573-645-0505	
REPRESENTING: AMERICAN COUNCIL OF ENGINEERING COMPANIES-MISSOURI, MISSOURI SOCIETY OF PROFESSIONAL ENGINEERS		TITLE:	
ADDRESS: PO BOX 1162			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65102
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/3/2021 12:00 AM	
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WITNESS NAME		
REGISTERED LOBBYIST:		
WITNESS NAME: SAM LICKLIDER		PHONE NUMBER:
REPRESENTING: MISSOURI ASSOCIATION OF LANDSCAPE ARCHITECTS		TITLE:
ADDRESS: PO BOX 1302		
CITY: JEFFERSON CITY		STATE: MO
		ZIP: 65102
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/3/2021 12:00 AM
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WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: ARNIE C. AC "HONEST-ABE" DIENOFF-STATE PUBLIC ADVO		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: arniedienoff@yahoo.com	ATTENDANCE: Written	SUBMIT DATE: 3/3/2021 5:30 AM
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I am Opposed to thjis Bill. Favors Special-Interest



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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: JORGEN SCHLEMEIER		PHONE NUMBER:	
REPRESENTING: MISSOURI HOTEL AND LODGING ASSOCIATION		TITLE:	
ADDRESS: 213 EAST CAPITOL AVENUE			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/3/2021 12:00 AM	
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WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: WILLIAM GAMBLE		PHONE NUMBER: 573-634-4876	
REPRESENTING: MISSOURI RAILROAD ASSOCIATION		TITLE:	
ADDRESS: PO BOX 1865			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65102
EMAIL:	ATTENDANCE:	SUBMIT DATE: 3/3/2021 12:00 AM	
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