



# OFFICE *of* ADMINISTRATION

## AUTHORIZED SIGNATURES

### DEPARTMENT OF REVENUE - KANSAS CITY LICENSE AGENT

	LAST NAME	FIRST NAME, MI	NOTES	STREET ADDRESS	CITY, STATE ZIP	EMAIL ADDRESS	OFFICE PHONE NO
SA	Ochoa	Julie		615 E. 13th Street, Suite 111	Kansas City, MO	jules@downtownkc.org	816-8424586
AA	Mollenkamp	John	Acting Director	Truman Building Room 670	Jefferson City, MO 65102	john.mollenkamp@dor.mo.gov	573-751-5671

\*SA = SIGNATURE AUTHORITY  
AA = APPOINTING AUTHORITY  
POC = POINT OF CONTACT