



MISSOURI HOUSE OF REPRESENTATIVES  
**WITNESS APPEARANCE FORM**

|  |                                 |  |      |
|--|---------------------------------|--|------|
| BILL NUMBER:<br><b>HB 296</b>  |                                 | DATE:<br><b>2/4/2025</b>                 |      |
| COMMITTEE:<br><b>Transportation</b>  |                                 |  |      |
| <b>TESTIFYING:</b> <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES |                                 |  |      |
| <b>WITNESS NAME</b>  |                                 |  |      |
| <b>INDIVIDUAL:</b>   |                                 |  |      |
| WITNESS NAME:<br><b>ARNIE C. "HONEST-ABE" DIENOFF-STATE PUBLIC ADVOCATE</b>  |                                 | PHONE NUMBER:                            |      |
| BUSINESS/ORGANIZATION NAME:  |                                 | TITLE:                                   |      |
| ADDRESS:   |                                 |  |      |
| CITY:  |                                 | STATE:                                   | ZIP: |
| EMAIL:<br><b>arniedienoff@yahoo.com</b>  | ATTENDANCE:<br><b>In-Person</b> | SUBMIT DATE:<br><b>2/4/2025 11:57 PM</b> |      |
| <b>THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.</b>  |                                 |  |      |



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| <b>WITNESS NAME</b>  |                               |   |
| <b>INDIVIDUAL:</b>   |                               |   |
| WITNESS NAME:<br><b>SCOTT MCMASTERS</b>  |                               | PHONE NUMBER:                             |
| BUSINESS/ORGANIZATION NAME:  |                               | TITLE:                                    |
| ADDRESS:   |                               |   |
| CITY:  |                               | STATE:      ZIP:                          |
| EMAIL:<br><b>scotty.mcm93@gmail.com</b>  | ATTENDANCE:<br><b>Written</b> | SUBMIT DATE:<br><b>1/31/2025 11:03 AM</b> |
| <b>THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.</b>  |                               |   |

Age must remain at 70. We have to encourage more people to take up driving not less by allowing someone older than retirement age to keeping a position when a younger, more qualified individual could be doing the job.



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| <b>WITNESS NAME</b>  |                               |   |
| <b>INDIVIDUAL:</b>   |                               |   |
| WITNESS NAME:<br><b>SUSAN GIBSON</b>   |                               | PHONE NUMBER:                           |
| BUSINESS/ORGANIZATION NAME:  |                               | TITLE:                                  |
| ADDRESS:   |                               |   |
| CITY:  |                               | STATE:      ZIP:                        |
| EMAIL:<br><b>Onesuegibson@protonmail.com</b>   | ATTENDANCE:<br><b>Written</b> | SUBMIT DATE:<br><b>2/1/2025 4:37 PM</b> |
| <b>THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.</b>  |                               |   |

The safety of children must be highest priority.