

MISSOURI HOUSE OF REPRESENTATIVES WITNESS APPEARANCE FORM

| BILL NUMBER: HB 799 | | | | DATE: 1/28/2025 | |
|--|----------------|-----------------------|------------------------------------|--------------------|--|
| COMMITTEE: Government Effici | ency | | | • | |
| TESTIFYING: | ☑IN SUPPORT OF | ☐ IN OPPOSITION TO | ☐FOR INFORM | MATIONAL PURPOSES | |
| | | WITNESS NAME | | | |
| INDIVIDUAL: | | | | | |
| WITNESS NAME: ARNIE C."HONEST-ABE" DIENOFF-STATE PUBLIC ADVOCATE | | | PHONE NUM | PHONE NUMBER: | |
| BUSINESS/ORGANIZATION NAME: | | | TITLE: | TITLE: | |
| ADDRESS: | | | · | | |
| CITY: | | | STATE: | ZIP: | |
| EMAIL: arniedienoff@yahoo.com | | ATTENDANCE: In-Person | SUBMIT DATE: 1/28/2025 11:54 PM | | |
| THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo. | | | | | |



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| WITNESS NAME | | | | | | |
| REGISTERED LOBBYIST: | | | | | | |
| WITNESS NAME: RONALD REILING | | | PHONE NUMBER: 314-602-0758 | | | |
| REPRESENTING: MIDWEST AUTO CAR ALLIANCE (MWACA) | | | | | | |
| ADDRESS: 2920 ELMCREST DR. | | | | | | |
| CITY: SAINT CHARLES | | | ZIP: 63301 | | | |
| EMAIL: ron@mwaca.org | ATTENDANCE: Written | SUBMIT I 1/27/20 | DATE: 025 6:27 PM | | | |

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The Midwest Auto Care Alliance (MWACA) and its 522 Automotive Service and Repair business members are opposed to any legislation that would change or weaken the Missouri State Vehicle Safety Program. The effectiveness of the program is well documented. The data confirms that states with Safety Inspection Programs show that the fatality due to mechanical failure is half compared to the states that do not require vehicle safety inspections. If you have any questions, please do not hesitate to reach out to me. Regards, Ron Reiling