

DEPARTMENT OF MISSOURI VETERANS OF FOREIGN WARS 3401 Knipp Drive Jefferson City, Missouri 65109

MISSOURI SPECIAL LICENSE PLATE EMBLEM USE DONATION

_____ hereby state that I am a member in good standing I Mr. / Ms. of the Department of Missouri, Veterans of Foreign Wars or its Auxiliaries. I am a member of VFW Post #_____ or Ladies Auxiliary to VFW Post #_____ located in ______ Mo. which is in District # _____. I am a Member at Large in the Department of Missouri. My Card # is: _____ I wish to make a nonrefundable donation in the amount of \$.00 to the VFW Department of Missouri in return for the right to apply for a Special VFW Department of Missouri License Plate. (\$25.00 One-year use. \$50.00 Two-year use) Applicant's Name: _________________(As it appears on your Credit Card) Address: ____ (Credit Card Billing Address) City: State: Zip:) - VFW/Auxiliary Card #: Telephone #: (Visa Disc American Express Check MasterCard # enclosed. 3-digit security code Credit Card Number Exp Date Found on the back of the card (There is a 3% Convenience Fee if using card) Email Address: ____

(Required for credit card payments)

NOTE: To obtain your special organization license plates, you must submit the statement we send to you and a \$15.00 special plate fee with your completed "Application for Missouri Personalized and Special License Plates" (DOR-1716), to the Missouri Department of Revenue, P.O. Box 100, Jefferson City, Missouri 65105-0100.

Received at VFW HQ on this date _____

Letter returned to applicant on this date _____