



**DEPARTMENT OF MISSOURI
VETERANS OF FOREIGN WARS
P.O. Box 26
Jefferson City, Missouri 65102**

MISSOURI SPECIAL LICENSE PLATE EMBLEM USE DONATION

I Mr. / Ms. _____ hereby state that I am a member in good standing 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 \$ _____ 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: _____

Telephone #: () _____ - _____ VFW/Auxiliary Card #: _____

MasterCard Visa Disc American Express Check # _____ enclosed.

Credit Card Number

3 digit security code
Found on the back of the card

Exp Date

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 _____

Tom McLerran, Quartermaster
VFW Department of Missouri