



SHOW YOUR NURSING PRIDE WITH A CUSTOM LICENSE PLATE!

The Center for Missouri Nurses (CFMN - formerly *Missouri Nurses Foundation*), a nonprofit dedicated to advancing the nursing profession, is excited to offer this specialty license plate honoring Missouri nurses. Our goal is to foster camaraderie among nurses and raise awareness of their vital contributions to our state. As a dedicated member of the nursing community, we invite you to proudly display your commitment to excellence by driving with this distinctive license plate. **NOT JUST FOR NURSES!** Anyone can order and display this plate, and join us in celebrating the passion and dedication of Missouri nurses!

HOW DO YOU GET A NURSING LICENSE PLATE?

1. Make a tax-deductible donation of \$25 for a one year plate, or \$50 for a two year plate to the Center for Missouri Nurses (CFMN). You can donate online by visiting our online payment form. You may also make your donation by phone at (573) 636-4623, or by mailing a check (please indicate the donation is for a license plate on the check) to:
*Center for Missouri Nurses
3340 American Avenue, Suite F
Jefferson City, MO 65109*
2. After you have submitted the donation, CFMN will email you an Emblem Use Authorization Statement (EUAS), and Missouri DOR Form 1716. The EUAS is proof that you contributed to MNF, and Form 1716 is the official application. Both documents are required by the Missouri DOR when you submit your plate application. **You will also be required to pay a \$15 application fee by check (made payable to the Department of Revenue).**
3. Finally, mail your application, EUAS and \$15 to:
*Motor Vehicle Bureau
P.O. Box 569
Jefferson City, MO 65105-0100.*

Your license plate may be picked up at your local license office when it's ready, and at that time you will need to pay any other applicable registration fees charged by the DOR.

ORDER ONLINE:
<https://c4mn.org/license-plate>



NOTE: You are required to fill out steps 1, 3, and 4 of Form 1716 to complete your order. See reverse side of this flyer.



Missouri Department of Revenue
**Application for Missouri Personalized
 and Special License Plates**

Any false statement in this application is a violation of the law and may be punished by fine or imprisonment or both.

Step 1	Name must appear as shown on vehicle title			(Please check which category of license plate you need)		
	Owner's Name			<input type="checkbox"/> Passenger	<input type="checkbox"/> Recreational Vehicle (motor home)	
	Street, RR, or P.O. Box Number			<input type="checkbox"/> Beyond Local 6 Truck	<input type="checkbox"/> Local 6 Truck (limited to a 50 mile radius)	
	City			<input type="checkbox"/> Beyond Local 12 Truck	<input type="checkbox"/> Local 12 Truck (limited to a 50 mile radius)	
	State	Zip Code	<input type="checkbox"/> Beyond Local 18 Truck	<input type="checkbox"/> Local 18 Truck (limited to a 50 mile radius)		
	Daytime Phone Number	Current Plate Number	<input type="checkbox"/> Motorcycle	<input type="checkbox"/> Motortricycle		
	() - - - - -	- - - - -	<input type="checkbox"/> Check here to add this symbol to your plate. (Form 1776, Physician's Statement for Disabled Person's License Plates is required. See back for more information.)			

Step 2	Submit fee shown below with this application.		
	<input type="checkbox"/> Regular Personalized (\$15) (Can be reserved at plates.mo.gov)	<input type="checkbox"/> Friends of Arrow Rock (\$15)	<input type="checkbox"/> Missouri Task Force 1 (\$15)
	<input type="checkbox"/> Amateur Radio (\$15)	<input type="checkbox"/> God Bless America (\$15)	<input type="checkbox"/> Missouri Travel Council (\$15)
	<input type="checkbox"/> American Heart Association (\$15)	<input type="checkbox"/> Greek Collegiate Organization (\$15)	<input type="checkbox"/> MKN Conference of Teamsters (\$15)
	<input type="checkbox"/> American Legion (\$15)	<input type="checkbox"/> Hearing Impaired Kids Endowment Fund (\$15)	<input type="checkbox"/> MO-AG Businesses (\$15)
	<input type="checkbox"/> Be An Organ Donor (\$15)	<input type="checkbox"/> Helping Schools (\$15)	<input type="checkbox"/> Order of the Arrow (\$15)
	<input type="checkbox"/> Breast Cancer Awareness (\$15)	<input type="checkbox"/> I'm Pet Friendly (\$15)	<input type="checkbox"/> Paramedic (\$15)
	<input type="checkbox"/> Cave State (\$15)	<input type="checkbox"/> Jefferson National Parks Association (\$15)	<input type="checkbox"/> Prince Hall (\$15)
	<input type="checkbox"/> Children's Trust Fund (Stock) (\$15)	<input type="checkbox"/> Kingdom of Calontir (\$15)	<input type="checkbox"/> Professional Sports Team (\$15)
	<input type="checkbox"/> Children's Trust Fund (\$15)	<input type="checkbox"/> Knights of Columbus (\$15)	<input type="checkbox"/> St. Louis Blues <input type="checkbox"/> St. Louis Cardinals
<input type="checkbox"/> Choose Life (\$15)	<input type="checkbox"/> Lions Club (Stock) (\$15)	<input type="checkbox"/> Kansas City Chiefs	
<input type="checkbox"/> Collegiate (\$15)	<input type="checkbox"/> Lions Club (\$15)	<input type="checkbox"/> Rotary International (\$15)	
Name of College or University _____	<input type="checkbox"/> Masonic Grand Lodge (\$15)	<input type="checkbox"/> Safari Club International (\$15)	
<input type="checkbox"/> Coroner's Office (\$15)	<input type="checkbox"/> Masters (\$15)	<input type="checkbox"/> Search and Rescue (\$15)	
<input type="checkbox"/> Custom Vehicle (\$15)	<input type="checkbox"/> Missouri 4-H (\$15)	<input type="checkbox"/> Shriners (\$15)	
<input type="checkbox"/> Disabled Person (\$15)	<input type="checkbox"/> Missouri Association of Realtors (\$15)	<input type="checkbox"/> Special Olympics (\$15)	
<input type="checkbox"/> Don't Tread on Me (\$15)	<input type="checkbox"/> Missouri Bicycle & Pedestrian Federation (\$15)	<input type="checkbox"/> St. Louis College of Pharmacy (\$15)	
<input type="checkbox"/> Ducks Unlimited (\$15)	<input type="checkbox"/> Missouri Botanical Garden (\$15)	<input type="checkbox"/> Street Rod (\$15)	
<input type="checkbox"/> Eagle Scout (\$15)	<input type="checkbox"/> Missouri Conservation Heritage (Stock) (\$15)	<input type="checkbox"/> Tribe of Mic-O-Say (\$15)	
<input type="checkbox"/> Eastern Star (\$15)	<input type="checkbox"/> Bird <input type="checkbox"/> Deer <input type="checkbox"/> Bald Eagle	<input type="checkbox"/> Kansas City District <input type="checkbox"/> St. Joseph District	
<input type="checkbox"/> Emergency Medical Technician (\$15)	<input type="checkbox"/> Missouri Conservation Heritage (\$15)	<input type="checkbox"/> Wilson Creek Battlefield (\$15)	
<input type="checkbox"/> Fight Terrorism (\$15)	<input type="checkbox"/> Bird <input type="checkbox"/> Deer <input type="checkbox"/> Bald Eagle	<input type="checkbox"/> Zoos (\$15) <input type="checkbox"/> Kansas City <input type="checkbox"/> St. Louis	
<input type="checkbox"/> Firefighter (Stock) (\$15)	<input type="checkbox"/> Missouri Elks Association (\$15)	<input type="checkbox"/> Shuttle Bus (\$15) — regular personalized	
<input type="checkbox"/> Firefighter (\$15)	<input type="checkbox"/> Missouri Federation of Square & Round Dance Clubs (\$15)	<input type="checkbox"/> Vanpool (\$15) — regular personalized	
<input type="checkbox"/> Former Legislator (\$15)	<input type="checkbox"/> Missouri Jaycee (Stock) (\$15)	<input checked="" type="checkbox"/> Other MO NURSES FOUNDATION	
Last Year Served _____	<input type="checkbox"/> Missouri Jaycee (\$15)	Note: Please contact the Missouri Department of Revenue for other specialty plates that may be available.	
<input type="checkbox"/> Fraternal Order of Eagles (\$15)	<input type="checkbox"/> Missouri Remembers POW/MIA (\$15)		
<input type="checkbox"/> Fraternal Order of Police (\$15)	<input type="checkbox"/> Missouri Stream Team Coalition (\$15)		

For all plates listed as "Stock," the Missouri Department of Revenue will select your license plate configuration.

Personalized plate choices (complete only if applying for personalized plates. Please include more than one choice.)

Please use all capital letters and show choices in order of preference. Regular personalized license plates may consist of no more than six characters plus a dash, a space, or an apostrophe. Personalized plates displaying an emblem or wheelchair symbol may consist of no more than six characters or five characters plus a dash, a space, or an apostrophe. Personalized plates displaying an emblem and wheelchair symbol are limited to four characters or three characters plus a dash, a space, or an apostrophe. Personalized motorcycle or motortricycle plates may consist of no more than six characters or five characters plus a dash, space, or an apostrophe. Personalized motorcycle or motortricycle plates displaying an emblem or wheelchair symbol may consist of no more than five characters or four characters plus a dash, space, or an apostrophe. Personalized motorcycle/motortricycle plates displaying an emblem and wheelchair symbol may consist of no more than three characters or two characters plus a dash, space, or an apostrophe. The Missouri Department of Revenue will not issue plates that contain any letters, numbers, or a combination of letters and numbers which are obscene, profane, patently offensive or contemptuous of a racial or ethnic group, offensive to good taste or decency, or would present an unreasonable danger to the health or safety of the applicant, of other users of streets and highways, or of the public in any location where the vehicle with such plate may be found. The Missouri Department of Revenue will not issue plates that conflict with the regular license numbering system.

Vehicle Plate Will Be Attached To	Year	Make	Model	VIN Number	
First Choice	Second Choice	Third Choice	Fourth Choice	Fifth Choice	Sixth Choice
Description of what the configuration above stands for.	Description of what the configuration above stands for.	Description of what the configuration above stands for.	Description of what the configuration above stands for.	Description of what the configuration above stands for.	Description of what the configuration above stands for.

Step 4	Must be completed by all applicants. These license plates will not be mailed. Indicate name of license office where plates are to be picked up.		
	Office	Office Number	I hereby certify under penalty of perjury that all information regarding this request is true and accurate and is made without intent to defraud and that all statutory requirements for personalized or special license plates have been met. I also acknowledge that, if the requested configuration is already issued for a vehicle I own, I must surrender those plates when I pick up the new plates bearing that configuration.
	Street	City	
Signature of Owner or Applicant X			