



Missouri Department of Revenue  
**Specialty License Plate  
 Development Application**

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JUN 30 2014

Motor Vehicle Bureau

The following items must be submitted with this completed form:

- Proof organization is a not-for-profit entity (is registered pursuant to 501 (c) of the 1986 Internal Revenue Code as amended, or equivalent law);
- \$5,000 application fee; and
- List of 200 potential license plate applicants.

See instructions and additional information on next page.

Step 1	Organization Information					
	Name Missouri Nurses Foundation			Date (MM/DD/YYYY) 06/26/2014		Telephone Number [REDACTED]
	Address [REDACTED]		City [REDACTED]	State [REDACTED]	Zip Code [REDACTED]	Fax Number [REDACTED]
	Website Address [REDACTED]			E-mail Address [REDACTED]		

Step 2	Organization Representative or Point of Contact Information					
	Name [REDACTED]			Telephone Number [REDACTED]		Fax Number [REDACTED]
	Address [REDACTED]		City [REDACTED]	State [REDACTED]	Zip Code [REDACTED]	Alternative Phone Number ( ) - -
E-mail Address						

Step 3	Legislative Sponsor(s) Information - At least one current member of the Missouri General Assembly must be listed.	
	Sponsor's Name Representative Jeanne Kirkton	Sponsor's District District 091
	Additional Sponsor's Name	Sponsor's District
	Additional Sponsor's Name	Sponsor's District
	Additional Sponsor's Name	Sponsor's District

Step 4	Proposed License Plate Information	
	Indicate below the organization's name or slogan that is to appear on the license plate. Nurses Advancing Health	
	Description of proposed license plate (e.g., background color, font color, color of "Missouri", etc.) License plate will be nurse specific. Colors, fonts, and details still being decided.	
	Include draft copy of the proposed license plate design.	
Indicate the contribution level(s) necessary to obtain an emblem use authorization statement (Form 5022) from the organization.		
Contribution Amounts <input type="checkbox"/> None <input checked="" type="checkbox"/> Annual: \$25.00 <input type="checkbox"/> One-Time: _____ <input type="checkbox"/> Biennial: _____		

Checklist	1. Specialty License Plate Development Application (Form 5052), including the name of at least one legislative sponsor;
	2. Not-for-profit documentation;
	3. \$5,000 fee; and
	4. List of 200 potential license plate applicants.

Form 5042 (Revised 03-2014)

**Mail to:** Motor Vehicle and Driver Licensing Division  
 Specialty License Plates  
 P.O. Box 569  
 Jefferson City, MO 65105-0569

**Phone:** (573) 526-3669

Visit <http://dor.mo.gov/mvdl>  
 for additional information.

