ARKANSAS FFA ASSOCIATION STATE OF ARKANSAS OFFICE OF MOTOR VEHICLE SIGNATURE FORM FOR LICENSE PLATE

I, the undersigned, verify the following:

- I am a resident of the state of Arkansas.
- I am the owner of one (1) or more vehicles. Unless prevented from doing so because of circumstances beyond my control, I will register at least one (1) vehicle I own with the special license plate named above, if such plates are approved by the Arkansas Department of Finance and Administration.
- I am aware that there are annual fees, in addition to the regular registration fees, for such special plates.
- I am aware that the Office of Motor Vehicles must receive a minimum of 500 signatures, \$5,000, or a combination thereof, before this special plate can be ordered or issued; I am aware that, under A.C.A. 27-14-303, the penalty for making a false statement on a motor vehicle application, concealing a material fact, or otherwise committing a fraud in any motor vehicle application, upon conviction, is punishable by a fine of not more than one thousand dollars (\$1000.00) or by imprisonment for not more than one (1) year or both.

Return by mail to: Arkansas FFA Association

Attn: Marion Fletcher 301 Catherine Park Road Hot Springs, AR 71913

APPLICANT SIGNATURES

	Applicant's Signature	Year, Make, and License Plate Number of a Vehicle Owned by Applicant
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