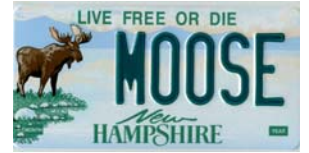




Robert L. Quinn
Commissioner of Safety

State of New Hampshire
Department of Safety
Division of Motor Vehicles
23 Hazen Drive, Concord, NH 03305
(603)227-4030



Director of Motor Vehicles

Conservation Plate Gift Certificate Application

Information needed on the person purchasing the gift certificate:

Name: _____ Telephone Number: _____

Date of Birth or License Number: _____

Address: _____
Street/P.O. Box *Town/City* *Zip Code*

Information needed on the person the gift certificate is purchased for:

Name of Recipient: _____
Last *First* *MI*

Date of Birth or License Number: _____

Address: _____
Street/P.O. Box *Town/City* *Zip Code*

Amount being credited: \$ _____

Please make checks payable to "State of NH – MV"

FOR OFFICIAL USE ONLY

Moose Credit Memo Number: M - _____ Computer Generated Number: _____

If customer pays by check, record driver license number: _____

Customer inquired about gift certificates for other Motor Vehicle services (i.e., licensing, initial plates)