

Arizona Highway Patrol & Department of Public Safety Heritage Museum, Inc.  
Friends of the Museum Donation Form

**For your records:**

Tax Exempt Public Charity Tax ID #46-5105755

Date: \_\_\_\_\_  Cash       Check      Number \_\_\_\_\_

----- Detach Here -----

**Mail this portion with your Donation**

Badge Number: \_\_\_\_\_ Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_

Cash     Check      Monetary Amount \$ \_\_\_\_\_

Make Checks Payable to AHP & DPS Museum and Mail to:

Bob Mitchell, Secretary, 2029 W Cambridge Ave, Phoenix, AZ 85009-1949