

Coalition of DPS Retirees Order Form

DPS Centennial Badge Order Form (Coalition of DPS Retirees Orders)

ORDERS MUST be received by December 1st, 2011

NAME: _____ BADGE #: _____ Address: _____

Contact Ph Number: _____

District Office: _____

(Retirees please list the closest DPS District Office)

Badge Type (write in the number of each type you are ordering)

TITLE/RANK:	Department of Public Safety	Arizona Highway Patrol	Arizona Capitol Police
Director			
Colonel			
Lt. Colonel			
Assistant Director			
Deputy Director			
Chief			
Commander			
Major			
Captain			
Lieutenant			
Sergeant			
Detective			
Officer			
Patrolman			
Pilot			
Motor Carrier Supervisor			
Motor Carrier Investigator			
Reserve Officer			
Reserve Sergeant			
Chaplain			
Civilian			

TOTAL QUANTITY OF BADGES ORDERED: _____ x \$57.00 each = _____ total price**

****MAKE CHECK PAYABLE TO: Coalition of DPS Retirees**

MAIL or DELIVER COMPLETED FOP ORDER FORMS TO:

Colin Peabody
 3937 W. Missouri Ave
 Phoenix, AZ 85019
 Home number: 602-841-5233
 Cell phone: 602-810-1495
 Email: collins60vette@cox.net

NOTE: ORDER FORMS MUST BE COMPLETELY FILLED OUT. PAYMENT MUST ACCOMPANY THE FORM. PLEASE MAKE SURE YOU HAVE THE CORRECT ORDER FORM FROM WHOM YOU ARE ORDERING.

QUESTIONS? Email: collins60vette@cox.net