



Arizona Peace Officers Memorial
 State of Arizona Memorial Board - Capitol - Wesley Bolin Plaza



MEMORIAL CORRECTION FORM

INFORMATION

Officer's Name as it currently appears on Memorial _____

Officer's Year of Death as it appears on the Memorial _____

Department _____

Corrected Name _____

Corrected Year of Death _____

If you are requesting that a name other than the officer's legal name be put on the Memorial, please provide an explanation:

What is your connection to the officer, department, or family?

Name of the person or group making this request

Name _____ Phone (____) _____

Address _____

City _____ State _____ Zip _____ - _____

Phone (____) _____ FAX (____) _____ e-mail _____

Date of Request ____/____/____ Date Reviewed ____/____/____

Attach any additional information to this cover page and send request to:

**Arizona Peace Officers Memorial Board
 1275 West Washington St.
 Phoenix, AZ 85007**