



Pioneer Arizona Foundation, Inc.
Incorporated July 20th, 1956
Pioneer Arizona Living History Village and Museum
Opened - February 15th, 1969

Donation Application Form (Please print all responses)

Name of Donor: _____
Name of Corporation/Organization/Foundation: _____
Contact Person (if applicable): _____

Street Address: _____
City: _____ State: _____ Zip Code: _____

Phone Number: Home _____ Business _____ Cell _____
Email Address: _____ Fax #: _____

Donation Categories Below

<p>A) Cash Contribution: Please enter amount of your gift: \$ _____</p> <p>\$ _____ (\$100 +) \$ _____ (\$1,000 +) \$ _____ (\$5,000 +) \$ _____ (\$10,000 +) \$ _____ (Other)</p> <p>Method of Payment: *Cash ___ *Check # _____ -payable to Pioneer Arizona Foundation, Inc.</p> <p>Credit Cards: Visa Master Card Discover {please circle}</p> <p>Card # _____ Expiration Date: _____ 3Digit Code#: _____</p> <p>*Card Billing Address {if different from above}: _____</p> <p>*City: _____ State: _____ Zip Code: _____</p> <p>*Card Billing Phone number {if different from above}: _____</p> <p>*Signature of cardholder: _____ (or on receipt)</p> <p>*Date: _____</p>

(B) Other categories of donation opportunities to help preserve and sustain Pioneer Village are to "Adopt a Building", "Donate a Building", and "Sponsor an Event or Program." Please check one or more.

- **Adopt a Building** – to sponsor one or more of the historic and or replica buildings for restoration and maintenance. _____
- **Donate a Building** – to donate a building and relocate it to Pioneer Village at Donor (s) expense and responsibility. _____
- I/We would like to be a **Sponsor for a Fundraising Event or Program** to help sustain Pioneer Village. _____

Please contact the Pioneer Arizona Foundation by calling or emailing the Pioneer Village Office for more information.
623.465.1052 Email – pioneerarizona@aol.com

"DONATIONS OF ARTIFACTS AND ITEMS BECOME THE PROPERTY OF THE PIONEER ARIZONA FOUNDATION, INC."

_____ Initials of Donor or representative
(The Pioneer Arizona Foundation, Inc. does not place value of a donation)

(C) Donation of Artifacts/Items: {Use separate sheet to list additional artifacts/items with information and attach to Donation Form}

1) Type of Artifact/ Item: _____

*Name of Artist: _____

*Original or copy of Documentation to accompany donation {list if apply}: _____

(Continued)



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*Item Measurement: _____ * Approximate Year: _____

*Provenience/History {if known}: _____

*Description of material the "Item" is made of or from: _____

*Item was originally obtained: (A) By WHOM _____ (B) WHEN _____
(C) WHERE _____ (D) Additional Information, if any: _____

"The purpose of this information is to provide general gift information." It is not intended as legal, accounting, or other professional advice. For assistance in planning charitable gifts with tax and other financial implications, the services of appropriate advisors should be obtained. Consult an attorney for advice if your plans require revision of a will or other legal document. The Foundation reserves the right to verify all Artifact/Item information for accuracy.

Donor's Signature: _____ Date: _____

Pioneer Arizona Foundation, Inc. Federal Tax I. D. Number: 86-0182044

The Pioneer Arizona Foundation, Inc. is a non-profit 501 © (3). Your donation may be tax deductible in accordance with IRS regulations.

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*623.465.1052 *Fax 623.465.0683 *3901 W. Pioneer Road, Phoenix, AZ 85086 *www.PIONEERAZ.ORG

The Pioneer Arizona Foundation Board, employees and volunteers of Pioneer Arizona Living History Village and Museum wish to thank you for your support and generosity in preserving the history of Arizona for generations to come. THANK YOU!

Official Use Only

- 1) Pioneer Village staff or designee has accepted artifacts/items and seeks recommendation by the board: _____ Initial
2) Provide board treasurer the donor's application: _____ Initial
3) Received Board Approval to accept donated artifact/item/gift: ___ YES ___ NO Date _____
4) Donated artifact/item arrival or delivery to Pioneer received: _____ Date _____ Initial
5) Method of Payment Received: \$_____ Cash \$_____ Check _____ # \$_____ CC & Authorization# _____ Date: _____
6) Gift Contribution donation: has been entered into Donor Gift Contribution data base and Thank You Letter sent: _____ Initial
7) Artifacts/Items donations: Have been assigned an Inventory Item Number: ___ Initial and entered into data base: ___ Initial
(Please list all artifacts/items with Inventory Item Number on a separate sheet and attach to this application.)
8) Artifact/Item (s) installation placement & date: _____
9) Processor's Signature: _____ Date: _____
10) Comments: _____