



Logo Request Form

Please complete this form and fax to 602-506-8789 or mail to:
Maricopa County Human Services Department: Logo Request
234 North Central Avenue, 3rd. floor
Phoenix, AZ 85004

Please provide the following contact information (fields marked with * are required):

Name:* _____

Title:* _____

Organization:* _____

Type of Organization:

- Government
- Non-Profit. Sec. 501(c)(3) Reg. No. (or "pending"): _____
- For profit corporation or other entity. State of incorporation: _____
- Individual

Street Address:* _____

City:* _____ State/Province:* _____

Zip/Postal code:* _____ Country:* _____

Phone:* _____ Fax: _____

E-mail:* _____

Please explain your request to use the HSD logo, including the type of item and quantity (if appropriate) to be produced:*

Date(s) of proposed use/event (or ongoing):* _____