

MISSISSIPPI
ARMED★FORCES
MUSEUM
CAMP SHELBY

Offer of Donation

Name: _____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Home #: _____ **Work #:** _____ **Cell #:** _____

Email: _____

In the space below, please write a complete description of each artifact you wish to donate to the Mississippi Armed Forces Museum. The back of this form and additional pages may be used if necessary. Please include any background and ownership information on the items and their significance to the history of Mississippi. Including provenance on the artifacts helps preserve the personal stories associated with each item and allows the Museum to better interpret the artifacts. Also, please attach photographs if available. *Please do not send the item(s) to the Museum until requested by staff.*

Please return the completed form to a Visitors Services Representative at the Museum or mail to the following address: **Mississippi Armed Forces Museum, ATTN: Registrar, 1001 Lee Avenue, Bldg. 850, Camp Shelby, MS 39407.**

Item(s) and Description:

I make this offer with the understanding that the Museum is under no obligation to accept this donation.

Signature: _____ **Date:** _____