



## Property & Evidence Association of Florida Membership Application

Agency's Name: \_\_\_\_\_ Chapter #: \_\_\_\_\_

Agency's Sheriff/Chief/Director \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_

Supervisor's Email: \_\_\_\_\_ Supervisor's Phone #: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Email Address: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
(Month/Date only)

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_ County: \_\_\_\_\_ Office Phone #: \_\_\_\_\_

Mailing Address (if different from street address): \_\_\_\_\_ Home: \_\_\_\_\_ Agency/Business: \_\_\_\_\_

Address: \_\_\_\_\_  
Street or P.O. Box City/State Zip Code

Referred By: \_\_\_\_\_

Membership Dues: \$25.00 per year \_\_\_\_\_ Voting Member \_\_\_\_\_ Corporate Member \_\_\_\_\_

Check #: \_\_\_\_\_ Or PayPal Receipt #: \_\_\_\_\_

After processing of your application, you will receive a membership certificate.

Please return this application with your check made payable to: Property & Evidence Association of Florida (PEAF) to:

PEAF  
934 N. University Drive #439  
Coral Springs, FL 33071

**The purpose of the P.E.A.F. is to promote education and professionalism of the property and evidence function within the State of Florida.**

**The primary goals of the Association shall be:**

- To provide for the research, collection, educational exchange, and dissemination of information relative to the property/evidence function.
- To promote professionalism of property/evidence personnel and to support high standards of performance in the accomplishment of this task.
- To solicit legal opinions and education of the membership on current and pending legislation that may impact the property/evidence function.
- To associate persons within the State of Florida who are concerned with the collection, preservation, and storage of property/evidence.