

## TO BE CONSIDERED FOR ACQUISITION

## Your items will not be considered for donation unless this form is fully completed. You may use the back of this form if you run out of room.

Name:		Date:
Street Address:		
City	State:	Zip:
Preferred Phone:	Secondary Phone:	
Email Address:		
Are you a museum member?		
Is the physical object in the museun ITEMS CAN ONLY BE LEFT AT THE MUSEUM I		
Items to be considered (include obje	ect count when possible and de	scription):

How are these items related to our region?

How did you come to own these items?

Intended Collection: \_\_\_\_\_

Form Received By:

**Potential Donor Signature:** 

Date:	

Date: \_\_\_\_\_