



A good mind. A good heart. A strong fire.

*Museum*

# Accession Sheet

Accession #

Accession Date

Old Number

Accessioned  
By

## CATEGORY

2D

3D

Classification

## ITEM DESCRIPTION

Title/Name of Item

Year

Brief Description

Miscellaneous Information

## PROVENANCE (SOURCE)

Tribal

Local

State

National

Medium or  
Materials

Dimensions in Inches

X

Artist

Collector

Credit Line

Previous Owners

- 
- 

Date Collected

Location Collected From

| DONOR                        |          |  |          |                 |          |  |            |  |     |  |
|------------------------------|----------|--|----------|-----------------|----------|--|------------|--|-----|--|
| Name                         |          |  |          |                 |          |  |            |  |     |  |
| Address                      |          |  |          | City            |          |  | State      |  | Zip |  |
| Phone                        |          |  |          |                 | E-Mail   |  |            |  |     |  |
| CONDITION                    |          |  |          |                 |          |  |            |  |     |  |
| Excellent                    | Good     |  | Fair     |                 | Poor     |  | Needs Work |  |     |  |
| Actions Taken                |          |  |          |                 |          |  |            |  |     |  |
| Rationale for Acquisition    |          |  |          |                 |          |  |            |  |     |  |
| Mode of Acquisition          |          |  |          |                 |          |  |            |  |     |  |
| Donated                      | Exchange |  | Transfer |                 | Purchase |  | \$         |  |     |  |
| Other                        |          |  |          |                 |          |  |            |  |     |  |
| APPRAISAL                    |          |  |          |                 |          |  |            |  |     |  |
| Yes                          | No       |  |          | Appraisal Value |          |  | \$         |  |     |  |
| Insurance Value              | \$       |  |          | Date Effective  |          |  |            |  |     |  |
| Appraisal Reference          |          |  |          |                 |          |  |            |  |     |  |
|                              |          |  |          |                 |          |  |            |  |     |  |
| PERMANENT STORAGE LOCATION   |          |  |          |                 |          |  |            |  |     |  |
| Stack                        | Shelf    |  | Drawer   |                 | Box      |  | Offsite    |  |     |  |
| Restrictions                 |          |  |          |                 |          |  |            |  |     |  |
| None                         | Yes      |  | Explain  |                 |          |  |            |  |     |  |
| Reference for Identification |          |  |          |                 |          |  |            |  |     |  |
| Accompanying Materials       |          |  |          |                 |          |  |            |  |     |  |
| Related Subject Headings     |          |  |          |                 |          |  |            |  |     |  |
| PAST PERFECT CATALOG         |          |  |          |                 |          |  |            |  |     |  |
| Entered into Database        | Yes      |  | No       |                 | Explain  |  |            |  |     |  |
| Catalog Date                 |          |  |          | Cataloged By    |          |  |            |  |     |  |