HISTORIC RED HOOK

DEED OF GIFT

Donor Information

Name: Edith I. Platt

Address: 152 Ferris Lane

City/State/Zip: Milan, NY

Telephone number(s): 845-758-1150

E-mail address: —

Additional Contact Person (optional): _____

Additional Contact E-mail (optional): _____

Additional Telephone Number (optional): _____

I certify that I am the owner or agent of the Item(s) listed below and I hereby donate and convey to Historic Red Hook, subject to the terms and conditions on the reverse of this form, all right, title and interest that I, my assigns and my heirs possess in said Items. The listed Items may be retained, exhibited, loaned or disposed of at the discretion of Historic Red Hook. I have read and agreed to the terms and conditions on the reverse of this form.

Description of Gift

FAMILY PHOTO ALBUM – EUGENE E. BUDD, ROWMAN *CASE FAMILIES
DONATED TO NORTHERN DUTCHESS HOSPITAL AUXILIARY THRIFT SHOP – DONOR UNKNOWN. EDITH PLATT THOUGHT IT SHOULD BE SAVED. (WORKS AT THE THRIFT SHOP?)

___ Material is in digital form only.

Special Considerations or Restrictions Regarding Gift

By my signature below I accept the forgoing conditions and acknowledge reading any attached information.

Dated: 2/14/2018 Donor/agent: Edith I. Platt

For use by Historic Red Hook:

Date received: 2/14/2018 Received by: CLAUDINE KLOSE

Accession #: 2018.004 Name/Title: _____