

Landmarks of DeKalb County

Potential Donor Form



Date: _____

Name: _____

Address: _____

Phone Number: _____

Email: _____

Condition of the Item(s):

____ Excellent

____ Good

____ Fair

____ Poor

What is/are the item(s)?

What can you tell us about their history (i.e. who owned or created them, the age of the items, their provenance, how they were used, etc)?

Has the item(s) been subjected to adverse environmental or storage conditions such as extreme heat or cold, pests, mildew, mold, etc? If yes please explain.

Is the item(s) temporarily being stored within our archives while the Board reviews the donation?

Yes

No

Will you place any restrictions or stipulations on your gift? If yes please explain.

Yes

No

Do you wish your status as a donor of this material to remain confidential?

Yes

No

If not, may we use your name in publicity relating to new accessions?

Yes

No

Agreement:

I understand that if in the future it is determined that the item(s) does not fit the acquisition statement of Landmarks of DeKalb County or if Landmarks chooses to deaccession the item(s), Landmarks of DeKalb County will follow the procedure laid out in their Collections Management Policy for the de-accessioning of museum or archival item(s).

Signature: _____

Date: _____