***Temporary Custody Receipt:***

**Depositor:**

Institution or Individual:

Contact:

Address:

Phone: Email:

**Purpose**:

Arrival Date:

Return Date:

**The items listed below are left in the custody of the Museum to be considered as:**

(initial applicable below)

1. \_\_\_\_An unconditional donation. The Museum reserves the right to keep, lend, or otherwise dispose of the donated material.
2. \_\_\_\_To be considered for acquisition
3. \_\_\_\_For identification or research. Does not constitute an authentication; will not include appraisals. The Museum reserves the right to photograph.
4. \_\_\_\_For other purposes. Please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Disposition if not accepted for accession:** (initial applicable)

\_\_\_\_\_Source will pick up

\_\_\_\_\_Museum will dispose of/destroy

\_\_\_\_\_May be sold to benefit Museum

**Item(s) and Description(s):**

**Special Instructions:**

**Insured By:**

Depositor: Museum Representative:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature, date Signature, date