

Sample Museum

Deaccession Record

Description of Object:

Accession # _____ Maker: _____

Object Name/ Title _____

Medium/ Material _____ Date _____

Means of Acquisition: _____

Restrictions: _____

If the object was a gift:

Is the donor still living? _____

Has the donor (or their heirs) been notified of the Museum's intentions?

Status of object: (attach photographs to sheet)

a. Overall condition _____

b. Last exhibited: _____

c. Current value: \$ _____

How determined? _____

Specific reasons for deaccessioning? _____

Sample Museum Director recommendation: _____

Date: _____

Signatures:

Sample Museum Director _____ Date

Sample Museum Authority _____ Date

Collections Committee Chair, Board of Trustees _____ Date

The above recommend the object be deaccessioned. ___yes ___no

The above recommend disposal of the object. ___yes ___no

Preferred means of disposal of this object. ___public auction ___exchange ___donation

Final disposition: _____

Value received: _____ Date: _____