

# Kelleys Island Historical Association

## DONATION FORM

Donated by \_\_\_\_\_ Date \_\_\_\_\_

Your address \_\_\_\_\_

City/State/ZIP \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ E-mail \_\_\_\_\_

COLLECTION NAME \_\_\_\_\_

(What do you want the collection called. This can be a family name, it does not have to be the donator's name.)

DESCRIPTION OF DONATED ITEMS & A LITTLE HISTORY – List the items being donated, where they came from, and their story. You can use the other side.



### PLEASE READ BEFORE SIGNING

These items become the property of KIHA and we may, or may not, display these articles in the KIHA museum.

Upon acceptance, KIHA assumes ownership of the items(s) and has the right to duplicate, reproduce, use and share as KIHA sees fit.

KIHA reserve the right to dispose of donated items at its discretion.

I certify that I am the owner of these items and that I have read and agreed to these terms.

Donator's signature \_\_\_\_\_

If not accepted, do you wish the materials returned to you? YES ( ) NO ( )

Do you require a tax receipt for this donation? YES ( ) NO ( )

If yes – What do you believe is the value of these items? \$ \_\_\_\_\_

### OFFICE USE

This donation was received by (KIHA representative) \_\_\_\_\_

( ) Accepted & approved by THREE KIHA Board Members \_\_\_\_\_

Declined - ( ) Not within scope ( ) Insufficient documentation ( ) Duplicate

( ) items returned on \_\_\_\_\_

Collection No. \_\_\_\_\_ Date \_\_\_\_\_