

Northern Neck Farm Museum
P.O. Box 365, Heathsville, VA 22473

Receipt No. _____

Custody Receipt

This acknowledges receipt of the item listed below by the Northern Neck Farm Museum from:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Work # _____ Home # _____ Cell # _____

Email: _____

The item listed below are left in the custody of the Northern Neck Farm Museum to be considered as:

_____ An unconditional donation. The Museum reserves the right to keep, lend or otherwise dispose of the donated material.

_____ To be considered for acquisition.

_____ For identification. Does not constitute an authentication; will not include appraisals. Museum reserves right to photograph.

_____ For loan _____ Temporary for exhibit _____ Indefinite until reclaimed.

_____ For other. Please specify _____

Disposition if not accepted for accession:

_____ Source will pick up. _____ Please dispose of or destroy. _____ May be sold to benefit Northern Neck Farm Museum.

Item and Description:

Historical Data:

Date: _____ Signature of Owner: _____ Title: _____

Date: _____ Received by Museum Representative: _____