## Royal Western Australian Historical Society (Inc) Stirling House 49 Broadway NEDLANDS WA 6009 Tel: (08) 9386 3841 Email: admin@histwest.com.au

Office Use only: Receipt No: Accession No./s



## MUSEUM DONATION AND RECEIPT FORM

Thank you for offering the object(s) described below to the Society. The Museum will consider receiving them into our Collection in line with our Collection Policy, and we will contact you with our decision. Please provide as much information as possible on the object/s - this will inform our decision making and increase the object/s value to the Museum.			
Contact details			
Title:	Last Name:	First Name/s:	
Street Address:			
		Post Code	
Phone:	Email:		
Ownership / Donor (if different to above)			
Brief description of object/	s (please list individually and use an ad	ditional sheet if required).	
Who made the object? Where and when was it made?			
Who was the owner, including relationship to Donor?			
When and where was it owned / used by this person			

	ondition)
Do you have any related what arranha? (or, of the chiest being your	
Do you have any related photographs? (eg. of the object being used	•
Who is the copyright holder (artworks and photographs) if known?	
Transfer of Ownership	
I/We the undersigned being the legal owner of the above object(s right of <u>revocation</u> , the object(s) described above, to the Royal Wes and in so doing confirm that I/we recognise that this donation will the Society will on receipt of the object(s) specified have absolute it/them at its own discretion.	stern Australian Historical Society (Inc.) cause a transfer of ownership and that
Donor's signature	Date
RWAHS representative	_Date
Please Note if the donation is not accepted into the RWAHS Museu education collection or library, transferred to another collection, or diobject(s) returned to you if not accepted in the RWAHS Museum?	
Yes No No	
Yes L No L  Office use only:	
	(Initial and Date)
Office use only:	(Initial and Date)
Office use only: Viewed by Museum Committee:	(Initial and Date)  Education Collection
Office use only: Viewed by Museum Committee:  To be accepted for:	
Office use only:  Viewed by Museum Committee:  To be accepted for:  Museum Collection  Library	Education Collection
Office use only: Viewed by Museum Committee:  To be accepted for:  Museum Collection  Library  To be returned to Donor:	Education Collection  Date
Office use only:  Viewed by Museum Committee:  To be accepted for:  Museum Collection  Library  To be returned to Donor:  Signature of Donor on return	Education Collection  Date