

Butternut Area Museum
126 E Main Street, Butternut WI 54514
Historical Item Cataloguing Worksheet

Image #: _____ Registration #: _____

Item Name: _____ Item Location: _____

*Description: _____

Keywords: _____

*Inscriptions & Markings: _____

Size: _____

*Makers Details: When Made: Exact Date _____ Estimated Date _____

*Where Made _____

Acquisition Details:

How Acquired: Loan Donated Bought When Acquired: _____

*Name of Individual/Organization Loaning/Donating Item: _____

*Address: _____

*Phone Number(s): () _____ () _____

*Comments: _____

Condition Note: _____

(*) To be completed by the Individual loaning/donating the item

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Receipt

Received From (Name of Individual or Organization Donating/Loaning item):

*Address: _____

*Phone Number(s): () _____ () _____

Date Item Received: _____

Registration Number: _____

Item Name: _____

Description: _____

Received by & Date: _____

Name of Person Receiving Item: _____

Title of Person Receiving Item: _____