

ARTIFACT DONATION FORM

The undersigned hereby makes a gift of the following described items, without restriction or qualification, to the Humphrey Museum and Seguin Township.

Item(s)	Description of item(s)

Donor's Name: _____ Donor's Signature: _____

Accepted for the Museum by: _____ Date: _____

Address: _____ Email Address: _____

Phone Number: _____