Temporary Custody Receipt

Sioux City Public Museum 607 4th Street Sioux City, IA 51101

This is to acknowledge receipt of the items listed below by the Sioux City Public Museum from:

Name: Address:	Date:			
City:			Zip:	
Email:	Website:			
Home#: _	Work#:	Fax#:	Cell#:	
 The items listed below are left in the custody of the Sioux City Public 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. The Museum reserves the right to photograph. For other purposes. Please specify				
Disposition if not accepted for accession: Source will pick up Please dispose of or destroy May be sold to benefit the Sioux City Public Museum Item and Description:				
Received by:		Received fro	om:	
(Signature)		(Signature)	(Signature)	
(Date)		(Date)		