



DONOR QUESTIONNAIRE



Alaska Aviation Museum DEED OF GIFT

Printed Name: _____ Date: _____

Hereafter referred to as the "donor," in full acknowledgement of the conditions printed below, hereby transfers, assigns and delivers all rights, title, and interest in and to the property described below to the Alaska Aviation Museum as an unrestricted gift. Items not chosen for accession may be disposed of by trade, sale, or other means unless otherwise specified.

Signature(s): _____

Address: _____

Telephone: _____ Email: _____

Please indicate exactly how you would like this gift attributed: (i.e. "In Memory of/Gift of ...")

“ _____
_____ ”

DESCRIPTION OF GIFT – Provenance (History, previous owners, age, etc.) _____

The donor has received no goods or services from the Alaska Aviation Museum in return for the donation described on this form.

CONDITIONS

1. Because of limited gallery space and the policy of changing exhibitions, the Alaska Aviation Museum cannot promise the permanent exhibition of any object.
2. Gifts to the Alaska Aviation Museum are tax deductible in accordance with IRS regulations. Evaluation by an appraiser for tax purposes is the responsibility of the donor. The Museum's tax ID number is 92-0071852 and is a Non Profit 501 (c) 3 Corporation.

This gift is accepted for the museum by: _____
Museum Official

Today's Date: _____



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Please answer as many questions as possible. The information you provide will help the Museum to fully document artifacts in its collections, and to better use them in cultural programs, research, and exhibits.

Name: _____ Object(s): _____

1. How long have you owned this object? _____

2. How did you acquire it? Purchase Inheritance Gift Found
 Other: _____

3. Where did you acquire it? _____

4. When did you acquire it? _____

5. Were there any previous owners? _____

6. Who made it? _____

7. Where was it made / purchased? _____

8. When was it made? _____

9. What materials is it made from? _____

10. Did you perform any repairs or make any changes while it was in your care? Yes No

If yes, explain: _____

11. How was it used? _____

12. Who used it? _____

13. Where was it used? _____

14. When was it used? _____

Additional Information (if you need more space, please use the back of this sheet or attach pages):