

# Apopka Historical Society, Inc.

122 E. Fifth Street  
Apopka, Florida 32703

## RECEIPT FOR ARTIFACTS

Date: \_\_\_\_\_

Donor's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone No: . \_\_\_\_\_ Email Address: \_\_\_\_\_

Condition of Grant: Gift<sup>1</sup> \_\_\_\_\_ Temporary Loan\* \_\_\_\_\_ Indefinite Loan\* \_\_\_\_\_

\*Date to be returned to donor: \_\_\_\_\_ Estimated Value: \_\_\_\_\_

<sup>1</sup>**Gift:** I own the property described below and desire to give said personal property to the Apopka Historical Society. I do hereby irrevocably and unconditionally give and transfer to the Apopka Historical Society all right, title and interest, including all copyright, trademark, and related interests, in and to the following described property.

Description of Objects (Please print clearly)

Catalog/Number (office use)

(Provide as much information as possible-use additional paper if needed)

- |    |       |       |
|----|-------|-------|
| 1. | _____ | _____ |
| 2. | _____ | _____ |
| 3. | _____ | _____ |
| 4. | _____ | _____ |
| 5. | _____ | _____ |
| 6. | _____ | _____ |
| 7. | _____ | _____ |
| 8. | _____ | _____ |

Signature of Donor: \_\_\_\_\_

Received for the Apopka Historical Society by;

\_\_\_\_\_  
(Name) (Title)

Make one copy: Original for museum  
Copy to Donor