

COLLECTION INVENTORY FORM
Archaeological Collections Facility of West Virginia

(Please complete this form for each site submitted to the repository)

Site No. _____ Site Name _____

Accession No. _____ Catalog Nos. _____

Collected by:

Name _____

Institution _____

Address _____

Project Name _____

Project or Contract No. _____

Date Submitted _____

Owner of Collection _____

Complete bibliographic reference _____

Send curation invoice to (fill in only if different than the address listed above):

Name _____

Institution _____

Address _____

Collection Inventory Form
Page 2 of 2

Site No. _____
Accession No. _____

- Artifacts and Catalog Sheets
- 2 copies of report
- Site form, Revised site form
- Field notes or journals
- Maps
- Black and White negatives
- Black and White prints
- Color negatives
- Color prints
- Slides
- Photographic Records
- Computer disks
- Other: _____

Form completed by _____ Date _____
Submitted to Repository by _____ Date _____
Received by _____ Date _____