



**HISTORICAL SOCIETY
OF CENTRAL FLORIDA**

DONOR QUESTIONNAIRE

Please answer all questions that you are able. Not all questions will apply to your donation. The information you provide is very important in helping us to fully document artifacts in our collection, and to use them in our interpretive programs and exhibits.

Name _____

Object _____

How long have you owned the object? _____

How did you acquire it? _____

Were there any previous owners? _____

Relationship? _____

Name _____

Birth date _____

Place of birth _____

Date of death: _____

Where lived: _____

Occupation: _____

Maker: _____

Where made/purchased: _____

Of what materials is it made? _____

Did you perform any repairs or make any changes to it while it was in your care?

Yes _____ No _____

If yes, please explain _____

How was it used? _____

Who used it? _____

Where was it used? _____

When was it used? _____

Additional comments: _____

If you run out of room, please use the back of this sheet, or attach additional pages. Thank you for your time and effort in completing this form.