CURATORIAL FACILITY CERTIFICATION PROGRAM ANNUAL REPORTING FORM

Please complete the fields relevant to the collection management activities for state-associated heldin-trust collections undertaken by your facility in the last year. Send to Elizabeth Martindale, Curatorial Facility Certification Coordinator, Texas Historical Commission, P.O. Box 12276, Austin, TX 78711-2276 (please attach additional sheets as needed).

Curatorial Facility:

Date Annual Reporting Form submitted*:

Name/Title:

Year being reported:

*Annual Reporting Form is due annually by January 31st.

ACQUISITIONS ACTIVITY:

No. of state-associated held-in-trust collections acquired during year: TAC Permit No. or HIT Collection name (if not permitted): Date of Acquisition: Manner of Acquisition (in-house generated, outside scholar): Status of THC Artifact Curation Form:

**Repeat above information for each individual state-associated held-in-trust acquisition.

ACCESSIONING ACTIVITY:

No. of state-associated held-in-trust collections accessioned during year: TAC Permit No. or HIT Collection name (if not permitted): Accession number assigned: Date accessioned: Total number of objects in collection: Total linear feet of documentation associated with collection: Discrepancies and / or problems encountered: General condition of collection: Status of Held-in-Trust Agreement:

**Repeat above information for each state-associated held-in-trust collection accessioned.

DEACCESSIONING ACTIVITY:

TAC Permit No. or HIT Collection name (if not permitted):

Accession number of the collection or the accession number of the collection from which the object comes:

Range of catalog numbers assigned to collection or catalog number of object:

Date deaccessioned:

Total number of objects in collection:

Total linear feet of documentation associated with collection:

Name and contact information for the receiving agency to which the deaccessioned object or collection is transferred: Discrepancies and / or problems encountered: General condition of collection or object deaccessioned: Description of Object(s): How Deaccession(s) were evaluated: Method of disposal used: Ultimate disposition/location:

Please submit a copy of the letter signed by THC concurring with or requesting deaccession and transfer of the collection if an entire collection was deaccessioned; or, if an object not in an approved category in the certification letter agreement.

**Repeat above information for each deaccessioned state-associated held-in-trust collection or object.

LOAN ACTIVITY:

INCOMING:

TAC Permit No. or HIT Collection name (if not permitted): Accession No.: Range of catalog numbers of collection or catalog number of object: Purpose of loan: (Research, Education, Conservation, Inspection): Lending institution: Conditions of Loan: Length of time and dates of loan: Loan inventory by category of material: General condition of collection or object: Date loan returned if during the reporting year cycle:

**Repeat above information for each incoming state-associated held-in-trust collection loan.

OUTGOING:

TAC Permit No. or HIT Collection name (if not permitted):
Accession No.:
Range of catalog numbers of collection or catalog number of object:
Purpose of loan: (Research, Education, Conservation, Inspection):
Borrowing institution:
Conditions of Loan:
Length of time and dates of loan:
Loan inventory by category of material:
General condition of collection or object:
Date loan returned if during the reporting year cycle:

**Repeat above information for each outgoing state-associated held-in-trust collection loan.

DESTRUCTIVE ANALYSIS LOANS:

TAC Permit No. or HIT Collection name (if not permitted):
Accession No.:
Catalog number(s) of object(s):
Borrowing institution:
Conditions of Loan:
Length of time and dates of loan:
Loan inventory by category of material:
General condition of object(s):
Date destructive loan analysis objects or information returned if during the reporting year cycle:

Please submit a copy of the letter signed by THC concurring with the destructive analysis loan if other than types of approved categories in certification letter agreement.

**Repeat above information for each state-associated held-in-trust collection destructive analysis loan.

INVENTORY ACTIVITY:

MISSING OBJECT(S):

TAC Permit No. or HIT Collection name (if not permitted): Accession No.: Catalog number of object: Date object discovered missing: Is an image available for identification and recovery purposes outside of the facility?

**Repeat above information for each missing state-associated held-in-trust object.

STOLEN OBJECT(S):

TAC Permit No. or HIT Collection name (if not permitted): Accession No.: Catalog number of object: Date object discovered stolen: Is an image available for identification and recovery purposes outside of the facility?

**Repeat above information for each stolen state-associated held-in-trust object.

INVENTORY

Type of inventory (comprehensive, spot-check, relocation): TAC Permit No. or HIT Collection name (if not permitted): Accession No.: Range of catalog numbers assigned to the inventoried collection: Date of inventory: Results of inventory by category of material: Discrepancies and problems encountered: General condition of inventoried collection:

**Repeat above information for each state-associated held-in-trust collection or object inventoried.

CONSERVATION ACTIVITY:

TAC Permit No. or HIT Collection name (if not permitted): Accession No.: Catalog number of object: Type of treatment undertaken: Date of treatment: Results of treatment: Problems encountered: Current condition of object:

Please submit a copy of the letter signed by THC approving in advance the treatment proposal if other than types of approved categories in certification letter agreement.

**Repeat above information for each state-associated held-in-trust collection or object conserved.

Texas Historical Commission P.O. Box 12276 Austin, TX 78711-2276 512.463.6100 fax 512.475.4872 thc@thc.state.tx.us



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