



**SEDONA
PUBLIC
LIBRARY**

Description of Artwork/Item Displayed

(Submission of this form does NOT confirm a display)

PLEASE SUBMIT THIS FORM ELECTRONICALLY WHENEVER POSSIBLE

Today's Date:

Artist/Displayer Name:

Institution or Organization (if applicable):

Mailing Address:

City/State/Zip Code

Telephone Contact:

Alt. Telephone:

FAX:

Email:

Artwork/Item Title:

Value of artwork/item:

Basis of Value (check one) Artist provided

Appraisal

Photograph Attached (check when provided)

Artist or Representative

Date

Sedona Public Library

Date

Artwork/item Picked Up (check when picked up)

Picked Up By (Artist or Rep): _____

Acknowledged (SPL): _____

Date: _____

Charge: _____