



ART DONATION FORM

Name:

(first) (middle) (last)

Email:

Address:

(street address or PO Box)

(city, state, zip)

Phone Number:

**Description of Art
to be Donated:**

**Dimensions
(Length, Width, Height):**

Media:

**History/Provenance
(if known):**

Value (if known):

Please submit a digital image of the prospective art donation for consideration. The image may be emailed to library@cityofcamas.us