

Collection name: _____ Date of Survey: _____

Families in collection: <i>List surnames; include allied lines.</i>	Major contributors to collection: <i>Note major creators of material (i.e. you, your grandparents, etc.).</i>
Collection Summary: <i>Summarize the types of materials.</i>	Location(s) of Collection: <i>Where is the collection stored?</i>

Storage: *Number and type of containers your collection is currently housed in.*

#	Notebook binders	#	File cabinets
#	Boxes	#	Other:

<p>Document type: <i>Check all that apply. Use "other" for items not on list.</i></p> <p><input type="checkbox"/> Family group sheets, charts</p> <p><input type="checkbox"/> Compiled genealogies (typed and handwritten)</p> <p><input type="checkbox"/> General genealogical research (notes, etc.)</p> <p><input type="checkbox"/> Letters/correspondence</p> <p><input type="checkbox"/> Military records</p> <p><input type="checkbox"/> Diaries/Journals</p> <p><input type="checkbox"/> Deeds</p> <p><input type="checkbox"/> Estate papers</p> <p><input type="checkbox"/> Vital records (certificates of birth, marriage, death)</p> <p><input type="checkbox"/> Other :</p> <p>Date range of original items: <i>Note date of original items only.</i></p>	<p>Special Formats: <i>Check all that apply. Add special formats as necessary.</i></p> <p><input type="checkbox"/> General oversized (diplomas, certificates, charts)</p> <p><input type="checkbox"/> Artifacts (medals, etc.)</p> <p><input type="checkbox"/> Film (negative, slide, microfilm, etc.)</p> <p><input type="checkbox"/> Photographs (loose)</p> <p><input type="checkbox"/> Photograph albums</p> <p><input type="checkbox"/> Scrapbooks</p> <p><input type="checkbox"/> Other bound volumes (family bible, etc.)</p> <p><input type="checkbox"/> Digital media (diskettes, flash drives, CD or DVD)</p> <p><input type="checkbox"/> Born digital</p> <p><input type="checkbox"/> Other :</p>	<p>Conservation and Preservation: <i>Issues relating to condition.</i></p> <p><input type="checkbox"/> Tape</p> <p><input type="checkbox"/> Metal fasteners (rusty clips, staples, other)</p> <p><input type="checkbox"/> Mold or water damage</p> <p><input type="checkbox"/> Insect or mice damage</p> <p><input type="checkbox"/> Excessive dirt / dust</p> <p><input type="checkbox"/> Damaged binding(s) in bound volumes</p> <p><input type="checkbox"/> Brittle paper</p> <p><input type="checkbox"/> Newspapers</p> <p><input type="checkbox"/> Other :</p> <p>Professional help: <i>Will you need to consult an expert about any item?</i></p>	<p>Supply needs: <i>What to purchase to properly store your collection.</i></p> <p>Boxes:</p> <table border="1"> <tr><td>#</td><td>Record cartons</td></tr> <tr><td>#</td><td>Document boxes (legal/letter size)</td></tr> <tr><td>#</td><td>Oversized (note dimensions):</td></tr> <tr><td>#</td><td>Other:</td></tr> </table> <p>Folders:</p> <table border="1"> <tr><td>#</td><td>Legal</td></tr> <tr><td>#</td><td>Letter</td></tr> <tr><td>#</td><td>Other:</td></tr> </table> <p>Other supplies:</p> <table border="1"> <tr><td>#</td><td>Plastic sleeves</td></tr> <tr><td>#</td><td>Photo supplies</td></tr> <tr><td>#</td><td>Other:</td></tr> </table>	#	Record cartons	#	Document boxes (legal/letter size)	#	Oversized (note dimensions):	#	Other:	#	Legal	#	Letter	#	Other:	#	Plastic sleeves	#	Photo supplies	#	Other:
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Additional Notes/Questions: