

Appendix 4

Durham Public Library
7 Maple Ave. Durham, CT 06422
(860) 349 – 9544 : www.durhamlibrary.org

TEMPORARY CUSTODY RECEIPT FORM

The Durham Public Library will evaluate the items for possible inclusion in the Local History Collection. List and describe the items to be evaluated:

Donor name (please print) _____

Address _____

Phone Number _____ Email _____

By Signing Below, I agree to the following:

- If the Library accepts the items for inclusion in the collection, I agree to sign and return a deed of gift assigning unconditional ownership of the items to the Durham Public Library.
- If the Library does not accept the items, I agree to return and pick up the items within 30 days of being notified at the address given above. Items not retrieved within 30 days may be discarded.
- I have read and understand the Local History Collection Development Policy.

Signature of Donor: _____ Date _____

Signature of Library Representative: _____

April 2018

Reviewed by Policies and Bylaws Committee February 2026