New Harmony Artists Guild, Inc.

ARTWORK CONDITION REPORT

Form NHAG 25-5

Date: _____

Exhibit:_____

Location:_____

Artist's Name_____

Title of Work(s):_____

Condition Description:

_____
_____
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_____

<u>At Acceptance of Work</u>:

Inspected by:_____Date:_____

Artist's Signature_____Date:_____

<u>Return of Work:</u>

Inspected by:_____Date:_____

Artist's Signature_____Date:_____