DPS Form 10
WORK PROJECTS ADMINISTRATION
WPA ART PROGRAM
RECORD CARD

STATE_____________________

SECTION I - to be filled in for all completed works
Name of Artist _______________________________ Medium ________________________________
Title of Work ________________________________ Date Completed ________________________
State__________________ County __________________________
City_________________________
Size of Work ________________ Unmatted Matted Unframed Framed

SECTION II - To be filled in for works allocated or loaned
To what agency has this work been allocated? Loaned? Date _______

Name ________________________________ Address___________________________________
City ________________________________ State _____________________________________

If loaned, indicate length of time loan approved _____________________________________

Section III - To be filled in for works sent to Washington
Photograph Negative No.___
Is this work to be returned to the state? ____________ Date of return _______________________
Place of return ________________________________ Date returned ________________________

(FRONT)

EXHIBITION RECORD

Exhibition
Number

Institution or Agency

Address

Dates Shown

(BACK)
SHIPPING RECEIPT

Date _____________________

Shipped To __________________________________________________________________________
____________________________________________________________________________

For Return ( ) For Exhibition #__________________ Title _________________________
For Loan ( ) held at _______________________________ Dates_____________________
For Allocation ( ) Shipping Expense to be Charged to ________________________________

ARTIST
STATE
TITLE
MEDIUM

Received by _____________________
Title ___________________________
Date ____________________________

IMPORTANT: PLEASE SIGN ORIGINAL AND RETURN AT ONCE AS ACKNOWLEDGEMENT OF RECEIPT. YOU MAY RETAIN DUPLICATE TO SERVE AS YOUR RECORD.

Space below reserved for Washington Office

Listed by ________________________ Entered on record cards by ________________________
Notified Mail Room to call for Parcel Post ( ) Packed by ________________________________
to make Bill of Lading and call Express ( ) Date Shipped ________________________________
BILL OF LADING: Original copy to addressee ( ) 2 copies to Mail Room ( ) 1 for File
(To be put on a 3" x 5" card)

DPS Form 12  
FEDERAL WORKS AGENCY  
WORK PROJECTS ADMINISTRATION  
WPA ART PROGRAM  
IDENTIFICATION CARD

<table>
<thead>
<tr>
<th>ARTIST</th>
<th>STATE</th>
<th>MEDIUM</th>
<th>TITLE OF WORK</th>
<th>ALLOCATED</th>
<th>LOANED TO</th>
<th>DATE</th>
</tr>
</thead>
</table>

The Above-named agency assumes the custody of this work subject to regulations of the WPA Art Program and agrees not to remove this identification.