

*New York State Archives*  
Strengthening Archives

## Reappraisal Form

Person Conducting Reappraisal:

Reappraisal Date:

Name of Collection/Series:

Collection Series Number:

Donor:

History:

Dates:

Review of Collection/Accession File:

Deed of Gift

Date:

Transfer Agreement

Date:

Contents of Collection:

Collection Use (research, exhibit, publication):

Condition:

Reappraisal Decision:

Signature: \_\_\_\_\_