

Helens Community Center



Item Donation Form

Date: _____

Accession/Inventory No: _____

Description of item(s):

Family connection or local significance of item(s):

I/we, the undersigned owner(s) and/or person(s) described below, do consent and authorize CCMA to display, edit, store, reproduce and circulate for all legal purposes of every description and use, the above described property. It is understood that the item(s) described above is a gift, and becomes property of Columbia County to be managed by the Columbia County Museum Association.

Donor Name(s): _____

Address: _____

Phone: _____

Email: _____

Donor(s) or Legal Representative signature: _____

CCMA is a registered 501(c)(3) tax exempt heritage organization. Our Tax ID Number is 06-1834021.

Copy given to the donor? Yes () No ()

Accepted for museum by: _____
CCMA, 230 Strand Street, St. Helens, Oregon 97051