



City of Pullman - Pullman Arts Commission

Attachment A

ATTACHMENT A
Donor/Lender

Page ___ of ___

Donor/Lender's Name: _____
 Donor/Lender's Address: _____

 Donor/Lender's Phone Number: _____

DATES: _____

	TITLE OF WORK	ARTIST	DIMENSIONS	MEDIUM	DATE OF WORK	INSURANCE VALUE
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