



CITY OF AUSTIN
Austin History Center ★ Austin Public Library

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 Phone 512-974-7480, Fax 512-974-7483

DEED OF GIFT

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DONOR SECTION (Please print or type clearly)

DATE _____

I, the **donor (name)** _____ or the **donor's representative (name)** _____, represent that I am the sole owner of the materials described above and that I have full right and authority to donate these materials to the Austin History Center ("AHC"). I hereby irrevocably donate and convey to the AHC all rights, title, and interest that I possess to the materials as described in this Deed of Gift. I understand that the location, retention and preservation of the materials, and other considerations relating to their use or disposition, will be made in accordance with AHC policies that the material may be made available for research on an unrestricted basis. I understand that the donations I am making are permanent donations. The City Of Austin does not advise donors on tax matters and suggests that donors direct any questions regarding donations as charitable contributions to the donor's tax advisor or an office of the Internal Revenue Service. The City Of Austin does not appraise donations but will make the materials available for appraisal upon the request of the donor.

Printed Name _____

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E-Mail _____

****SIGNATURE REQUIRED, SEE REVERSE****

BRIEF DESCRIPTION OF DONATION (for digital materials, please also complete page 3)

Types of materials _____

General subject/content _____

Approximate dates of materials _____

Your relationship to materials _____

Quantity _____

(Continue on other side)

REGISTRATION SECTION (Staff Use Only)

If one or more of the donated items do not fall within the Austin History Center collection guidelines, do you want us to:

_____dispose of or transfer the materials to the appropriate location or institution? OR

_____return the material to you

Would you like to receive written acknowledgement of your donation to the Austin History Center?

_____yes _____no

COPYRIGHT INTERESTS

Please read and initial one option:

_____ I represent and warrant that I am the owner of the copyright in all or some of the materials I am donating. (Please indicate below the materials for which you control copyright and the nature of your copyright control, e.g. sole/joint owner, heir, literary executor, trustee, etc.)

_____ I do not own or control the copyright in any of the donated materials.

_____ To the best of my knowledge the copyright interests are controlled by:

Name: _____

Address: _____

Telephone: _____ E-Mail: _____

COPYRIGHT CONVEYANCE

If you have indicated that you own the copyright in some of all of the donated materials, please read and initial one option:

_____ I wish to transfer, convey and assign to the AHC and the City all copyright interests, including renewals and extensions to the copyrights, of the above-described donated materials.

_____ I do not wish to transfer or convey any of the copyright I own to the AHC or the City, but I grant the AHC and the City a non-exclusive right to authorize all uses of these materials for research, scholarly, or other educational purposes and to display the materials in AHC-sponsored exhibitions, displays, catalogs, and publications. Some of the discretionary uses incidental to the donated materials' inclusion in the collections of the AHC may implicate copyrights. To the extent that such activities are not already permitted under statutory copyright exceptions such as the Fair Use Doctrine, I grant the AHC and the City an irrevocable non-exclusive royalty-free worldwide perpetual license for all reasonable discretionary uses. Users wishing to publish reproductions may do so with the restrictions explained in restriction code _____ (indicate code number). The restriction will expire on (indicate date) _____, after which time the AHC may continue to reproduce these materials under the non-exclusive rights described above, without restriction.

_____ I wish to retain copyright until (indicate date) _____ after which time all copyright interests, including renewals and extensions to the copyrights, of the above-described donated materials will be transferred, conveyed and assigned to the AHC and the City. Until that time users wishing to publish reproductions may do so with the restrictions explained in restriction code _____ (indicate code number).

Donor's Signature

Date

Donor's Title:

(if donor is a company or institution)

STAFF SECTION Receiving staff _____

Date Received _____

Comments:

FOR SUBMISSIONS OF DIGITAL FILES/ELECTRONIC MATERIALS ONLY:

File(s) description/Business function:

File Types: Word Excel PowerPoint Access PDF SharePoint .txt .db .csv .tiff .jpg .wav .mp3 .wma .aiff .mpa .avi .flv .mov .mp4 .mpg .wmv Other _____

Special Software Needed to Open Files: Yes No

If this answer is yes please contact the Austin History Center before continuing

Relationship with Other Records:

Are there corresponding paper materials that provide further context for these electronic records?

Yes No

Personal Identifying Information (social security numbers, email addresses etc.) likely to be found: Yes No

Please specify what PII is likely to be found: _____

The AHC will make every attempt to remove and/or redact any PII information found in the donation.

During Disk Imaging Some Deleted Files May be Recovered, Should the Files be Recovered and Considered Part of the Donation.

Yes No

If you select "Yes" please understand that the AHC does not currently possess the technological capability to restrict access to these recovered files.

Storage medium, count, total size/quantity of the data set:

Storage medium (please circle): DVD, CD, flash drive, hard drive, SFTP)

Count: Transfer media _____ Number of files _____

Total size (please circle the estimated total quantity of files in this donation) (ex. 3 DVDs)

_____B, KB, MB, GB, TB