

Quilt Appraisal Request Form

If you would like your quilt appraised, please attach a check for \$60 (member) or \$65 (non-member) payable to SCHQ to this completed form. The information included on this form will help facilitate the appraisal process.

Your quilt appraisal will be for **insurance purposes** unless you specifically request another type, such as market value or donation.

Owner of quilt _____

Address _____

City, State, Zip _____

Phone _____ E-mail _____

Pattern/Title of Quilt _____

Your Title of the Quilt (if different) _____

Size _____

Date made _____

Maker _____ Town _____

Quilter _____ Town _____

Designer/Inspiration _____

Special Techniques _____

Fabrics (if known) _____

Colors _____

Batting (if known) _____

Provenance (Has the quilt been exhibited in shows, won awards, or been published in a book or magazine?)

Maker's Provenance: (maker's note of fame, publications, awards at local, regional, or national quilt events.)

Does the maker have records of sales of similar quilts? If new: No ___ Yes ___

If yes, what was the purchase price? _____

Please add additional information on back or attach if needed

SUE HARMON

AQS Certified Quilted Textile Appraiser

Member-PAAQT: Professional Association of Appraisers-Quilted Textiles

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