

Center for Archaeological Studies
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COLLECTION PROCESSING RECORD

Project Name: _____

Company: _____ Project Number: _____

Cleaning/Processing

Unwashed Specimens Yes No Specify: _____

Untreated Samples Yes No Specify: _____

Acid Bath Yes No Specify: _____

Water Additives Yes No Specify: _____
 (including field treatments)

Labeling

Labeling Method(s) Pen/Ink Labels Typed Paper Labels Tie-on/Sew-on Labels

Pen or Ink Type: _____ Resin Type (e.g. Paraloid B-72): _____

Solvent Type: _____ Solution Concentration (%): _____

Treatments

Consolidation Treatment Yes No Specify: _____

Preservation Treatment Yes No Specify: _____

Conservation Treatment Yes No Specify: _____

Treatment Report Yes No Specify: _____
 Attached*

**Include any final reports, photographs, and/or condition reports from professional conservators*

Explain any other treatments or processing of the artifacts and/or records not addressed above: