

RICHARD DIEBENKORN CATALOGUE RAISONNÉ

CATALOGUE RAISONNÉ SUBMISSION FORM

This form is for the submission of unique works only (no prints or multiples). One work per form. Please type or print. All information is strictly confidential. Visit <http://registration.diebenkorn.org> for an online version of this form.

• Work of Art •

Title: _____ Date: _____

Medium: _____

Signature/Inscription (PLEASE TRANSCRIBE, INCLUDE ANY INITIALS): _____

Location of signature on work: _____

Dimensions (measure to the nearest 1/8 inch): H _____ inches W _____ inches

Labels or markings on reverse: _____

Description of work: _____

• Provenance •

Please include any relevant documentation (invoices, receipts, letters) as well as any dealer inventory numbers or auction sale and lot numbers.

1. You

Name(s) _____ Daytime telephone _____

Street, city, state, zip _____

E-mail address (used only for correspondence regarding your works) _____ Purchase year _____

Do you still own the work? (PLEASE CIRCLE) YES NO

If sold, when? _____ Sold to/by (NAME OF BUYER, DEALER, BROKER, CONSULTANT, OR OTHER AGENT): _____

Your collection credit for the catalogue raisonné [e.g. "your name(s)" or "Private Collection"]:

Include city? (PLEASE CIRCLE) YES NO Include state? YES NO

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Do you wish to have your e-mail address added to our mailing list for catalogue raisonné announcements? Addresses remain strictly confidential. (PLEASE CIRCLE) YES NO

2. Previous Owner (from whom you acquired the work):

Name(s) Telephone

Street, city, state, zip

Date acquired and any additional information

Other Known Prior Owners:

Name Date acquired

Name Date acquired

3. Exhibition History:

4. Publication History:

• Photography •

Please indicate the format (slide, 8x10, TIFF, etc.) of any photographic materials you may have of your work(s).

Should we be in need of high-quality photography of your work(s), we will make every attempt to obtain new photography through a visit to your site by arrangement. Below please indicate the contact person for scheduling a photo visit.

Name

E-mail address Telephone