



MINNESOTA HISTORICAL SOCIETY

**BAG LABEL FORM**

<b>Name of Program/Company</b>	<b>Name of Program/Company</b>	<b>Name of Program/Company</b>
Acc. # _____ Cat. _____	Acc. # _____ Cat. # _____	Acc. # _____ Cat. # _____
Site Name _____	Site Name _____	Site Name _____
Site # _____ Field # _____	Site # _____ Field # _____	Site # _____ Field # _____
Horz. Prov. _____	Horz. Prov. _____	Horz. Prov. _____
Vert. Prov. _____	Vert. Prov. _____	Vert. Prov. _____
Date _____ Fea. _____	Date _____ Fea. _____	Date _____ Fea. _____
Name _____	Name _____	Name _____
Note _____	Note _____	Note _____
_____ Count _____	_____ Count _____	_____ Count _____

Please print tags on acid free paper.