

PROPOSITION DE DOCUMENTS

AUX ARCHIVES DÉPARTEMENTALES

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| |  |  | | --- | --- | | **CONTACT** | | | **Nom et Prénom** |  | | **Adresse** |  | | **Messagerie** |  | | **Téléphone** |  | | | |
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| |  |  | | --- | --- | | **STATUT DU TRANSFERT**  (Cocher la case correspondante) | | | **Don** |  | | **Dépôt** |  | | **Prêt pour numérisation** |  | | **Autre** (préciser) |  | | | |
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| |  |  |  |  | | --- | --- | --- | --- | | **TYPE DE DOCUMENTS**  (Cocher la/les case(s) correspondante(s)) | | | | | **Archives personnelles ou familiales** |  | **Archives cultuelles** |  | | **Archives d’entreprises** |  | **Archives de photographes** |  | | **Archives d’associations** |  | **Archives syndicales** |  | | **Archives de photographes** |  | **Archives notariales** (dossiers de clients) |  | | **Archives d’architectes** |  | **Iconographie** (photos, cartes postales, affiches…) |  | | **Archives politiques** |  | **Bibliothèque** (Livres, brochures) |  | | **Archives d’érudits, écrivains, artistes** |  | **Autre** *(préciser)* |  | | | |
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| |  |  |  | | --- | --- | --- | | **DESCRIPTION DES DOCUMENTS PROPOSÉS** | | | | **Dates extrêmes des documents** |  | | | **Volumétrie ou métrage linéaire** |  | | | **État sanitaire des documents** (bon état, abimé, présence de moisissures…) |  | | | **Liste détaillée des documents** (Cocher la case correspondante) | **Oui** | **Non** | | **Présentation générale des documents** |  | | | **Historique ou biographie du producteur** |  | | |

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