

**Missouri Community Legacies Audio and Video Recording Log**

If you are including audio or video recordings as part of your Missouri Community Legacies project, please complete the audio and video recording log. Add pages as necessary.

Recording No. \_\_\_\_\_ Contributor name: \_\_\_\_\_

Contributor address: \_\_\_\_\_

Contributor city / state / zip code: \_\_\_\_\_

Contributor phone number: \_\_\_\_\_ Contributor email: \_\_\_\_\_

Contributor's organizational affiliation (if any): \_\_\_\_\_

Date of recording: \_\_\_\_\_ Location of recording: \_\_\_\_\_

Recording format: \_\_\_\_\_

Are required permission forms included: \_\_\_\_\_

Description of contents: \_\_\_\_\_

\_\_\_\_\_

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