

# Preservation Lab Book Conservation Worksheet - 3rd Party Work

**Digitization**      **Item Record #**      **Database ID**      **Collection**      **Call Number**      **Date In**      **Date Out**  
 No      i3445      22      3rd Party Work      102340      06/11/2019

## Title

Farewell to Arms

## Imprint

Dutton

## Author

James Joyce

DESCRIPTION									
BINDING TYPE	COVERING MATERIAL	MEDIA	LEAF ATTACHMENT	TEXTBLOCK MATERIAL	PHOTODOCUMENTATION				
<input type="checkbox"/> In boards <input type="checkbox"/> Cased <input type="checkbox"/> Laced-case <input type="checkbox"/> Lapped component <input type="checkbox"/> Pamphlet <input type="checkbox"/> Loose leaf <input type="checkbox"/> Other	<input type="checkbox"/> Leather <input type="checkbox"/> Tawed <input type="checkbox"/> Parchment <input type="checkbox"/> Paper <input type="checkbox"/> Cloth <input type="checkbox"/> Other	<input type="checkbox"/> Printer's ink <input type="checkbox"/> Manuscript ink <input type="checkbox"/> Graphite <input type="checkbox"/> Color inks <input type="checkbox"/> Pigments/ Illumination <input type="checkbox"/> Library stamp <input type="checkbox"/> Other	<input type="checkbox"/> Sewn through fold <input type="checkbox"/> Stabbed/side-sewn <input type="checkbox"/> Hinged <input type="checkbox"/> Stapled <input type="checkbox"/> Adhesive <input type="checkbox"/> Spiral bound <input type="checkbox"/> Other	<input type="checkbox"/> Wove paper <input type="checkbox"/> Laid paper <input type="checkbox"/> Parchment <input type="checkbox"/> Other _____	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> IR <input type="checkbox"/> RTI <input type="checkbox"/> Cond. Report Total Minutes:				
CONDITION		TREATMENT			INITIALS	MIN			
<b>BINDING DAMAGE</b> <input type="checkbox"/> Surface dirt <input type="checkbox"/> Red Rot <input type="checkbox"/> Boards detached <input type="checkbox"/> Boards missing <input type="checkbox"/> Spine detached/missing <input type="checkbox"/> Outer joints split <input type="checkbox"/> Inner hinges broken <input type="checkbox"/> Cover detached <input type="checkbox"/> Torn cover <input type="checkbox"/> Cover warped/distorted <input type="checkbox"/> Corners damaged <input type="checkbox"/> Caps damaged/missing <input type="checkbox"/> Brittle spine lining <input type="checkbox"/> Prior Repairs <input type="checkbox"/> Sewing broken <input type="checkbox"/> Split textblock <input type="checkbox"/> Other:		<b>BINDING REPAIR</b> <input type="checkbox"/> Surface cleaned <input type="checkbox"/> Leather consolidation <input type="checkbox"/> Boards reattached/reinforced <input type="checkbox"/> New cover/binding <input type="checkbox"/> Rebacked <input type="checkbox"/> Spine reattached <input type="checkbox"/> Minor structure repair <input type="checkbox"/> Inner hinges repaired <input type="checkbox"/> Reattached case <input type="checkbox"/> Cover Repaired <input type="checkbox"/> Cover/board flattened <input type="checkbox"/> Corners repaired <input type="checkbox"/> Caps repaired/replaced <input type="checkbox"/> Spine cleaned/lined <input type="checkbox"/> Removed damaging prior repairs <input type="checkbox"/> Disbound <input type="checkbox"/> Resewn/sewing repaired <input type="checkbox"/> New encapsulated binding <input type="checkbox"/> Other:			<b>MATERIALS USED</b>				
<b>TEXTBLOCK DAMAGE</b> <input type="checkbox"/> Surface dirt <input type="checkbox"/> Minor tears or losses <input type="checkbox"/> Major tears or losses <input type="checkbox"/> Insect/Pest damage <input type="checkbox"/> Loose detached material <input type="checkbox"/> Staining/discoloration <input type="checkbox"/> Acidic/brittle <input type="checkbox"/> Acidic endleaves <input type="checkbox"/> Cockling <input type="checkbox"/> Creases/folds <input type="checkbox"/> Media offsetting/burn <input type="checkbox"/> Flaking media <input type="checkbox"/> Mold damage <input type="checkbox"/> Foxing <input type="checkbox"/> Tape/adhesive residue <input type="checkbox"/> Damaging fasteners <input type="checkbox"/> Accretions <input type="checkbox"/> Other:		<b>TEXTBLOCK REPAIR</b> <input type="checkbox"/> Dry cleaning <input type="checkbox"/> Pages repaired/guarded <input type="checkbox"/> Losses filled <input type="checkbox"/> Loose leaves reattached <input type="checkbox"/> Washed / reduced staining <input type="checkbox"/> Deacidified <input type="checkbox"/> Replaced endleaves <input type="checkbox"/> Re-sized <input type="checkbox"/> Humidified <input type="checkbox"/> Flattened <input type="checkbox"/> Interleaved <input type="checkbox"/> Consolidated media <input type="checkbox"/> Reduced mold <input type="checkbox"/> Removed tape/adhesive reduced <input type="checkbox"/> Removed fasteners <input type="checkbox"/> Reduced accretions <input type="checkbox"/> Other:							
<b>ENCLOSURE</b> <input type="checkbox"/> CoLibri <input type="checkbox"/> Polyester Jacket		<input type="checkbox"/> Encapsulated <input type="checkbox"/> L-sleeve <input type="checkbox"/> Tux box <input type="checkbox"/> Banker's box	<input type="checkbox"/> Manuscript binder <input type="checkbox"/> Corrugated clamshell <input type="checkbox"/> Cloth covered clamshell <input type="checkbox"/> Integrated cradle <input type="checkbox"/> Other:	<input type="checkbox"/> Surrogate <input type="checkbox"/> Matted _____ <input type="checkbox"/> Portfolio with ties					
<input type="checkbox"/> Abbrev. Cons. Note Added <input type="checkbox"/> Full Report <input type="checkbox"/> Cond Report	<b>Treat Exhibits</b>	<b>DigiPrep</b>	<b>Survey</b>	<b>Storage</b>	<b>Salvage</b>	<b>Train IPM</b>	Total Min		