

Michigan Quilt Project Inventory Form

For office use
MQP #

Thank you for completing this Michigan Quilt Project Inventory Form. The information gathered here will be placed in the Michigan Quilt Project files in the Michigan Traditional Arts Program Research Collections at the Michigan State University Museum. The Michigan Quilt Project seeks information about Michigan quilts and quilters, and is an ongoing project with exhibits, publications, and presentations coordinated by the Michigan State University Museum in cooperation with many individuals and organizations.

Please use one form for each quilt inventoried. **If you are providing information about more than one quilt made by a particular quiltmaker, you need only complete Section C once.** Additional information is welcome; please attach extra sheets if necessary.

Section A: Owner's Information (Your address and phone number will be kept confidential)

Owner's name _____
Address: _____
City: _____ State: _____ Zip: _____
County: _____ Phone #: _____

How was this quilt acquired? Please check all that apply:

- | | | |
|---|--|---|
| <input type="checkbox"/> Made the quilt | <input type="checkbox"/> Presentation or award | <input type="checkbox"/> Other... _____ |
| <input type="checkbox"/> Received as a gift | <input type="checkbox"/> Raffle or contest prize | _____ |
| <input type="checkbox"/> Inherited | <input type="checkbox"/> Purchased | _____ |

If the quilt was not made by the owner: Acquired from: _____

Relationship to owner: (i.e. maternal grandmother) _____

Place: _____ date acquired: _____

Occasion (if gift or presentation): _____

How is this quilt used? Please check all that apply:

- | | | |
|---|--|---|
| <input type="checkbox"/> Bedding, daily use | <input type="checkbox"/> Wall hanging or art | <input type="checkbox"/> Other... _____ |
| <input type="checkbox"/> Bedding, special occasions | <input type="checkbox"/> Investment | _____ |
| <input type="checkbox"/> Room decoration | <input type="checkbox"/> Study or teaching aid | _____ |
| <input type="checkbox"/> Lap robe or throw | <input type="checkbox"/> Memento or souvenir | _____ |

RELEASE: I release to the Michigan State University Museum the information recorded on this form, the photos provided with this form, and the related photos taken by the MSU Museum for the educational and research purposes they deem appropriate.

Name: _____ Date: _____

May the staff of the Michigan Quilt Documentation Project contact you about this quilt?

- Yes, contact owner Yes, contact maker Yes, contact _____ No

Section B: Historical and Cultural Information About this Quilt

Who quilted this quilt?

- Top's maker Professional quilter Group Unknown Other...

If quilted by someone other than the top's maker, please list quilter's name, location, and fee charged (if any): _____

When was the quilt started? _____ When was the quilt finished? _____

Where did the quiltmaker live at the time (city/county/state)? _____

Why was this quilt made? Please check all that apply.

- | | | |
|---|---|---|
| <input type="checkbox"/> Personal/Family use | <input type="checkbox"/> Bridal/Anniversary | <input type="checkbox"/> Pillow |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> Gift/Presentation | <input type="checkbox"/> Garment |
| <input type="checkbox"/> Autograph/Friendship | <input type="checkbox"/> Home decor | <input type="checkbox"/> Teaching/Learning sample |
| <input type="checkbox"/> Album | <input type="checkbox"/> Wall hanging | <input type="checkbox"/> Competition |
| <input type="checkbox"/> Commemorative | <input type="checkbox"/> Doll quilt | <input type="checkbox"/> Other... _____ |
| <input type="checkbox"/> Mourning | <input type="checkbox"/> Baby/Crib quilt | |

Please describe any special stories, memories, or other interesting things about this quilt, the fabrics in it, or about quilting in general:

What is the source of the quilt's pattern?

- Maker's invention Commercial (book, magazine, etc.) Provided in class
 Kit Copied from another quilt Unknown

Source name: _____

Has this quilt been exhibited or published? Yes No

If yes, please list show name, place and date, or publication name and date.
Include any awards or ribbons:

Are there other materials available regarding this quilt?

- | | | |
|--|---|--|
| <input type="checkbox"/> Patterns | <input type="checkbox"/> Interviews With Quilter | <input type="checkbox"/> Diary Or Will Description |
| <input type="checkbox"/> Templates | <input type="checkbox"/> Clippings Or Photocopies | <input type="checkbox"/> Other... |
| <input type="checkbox"/> Prizes, Awards, Ribbons, Etc. | <input type="checkbox"/> Audiotape | |
| <input type="checkbox"/> Photos Of Quilter | <input type="checkbox"/> Videotape | |

Section C: Quiltmaker Information (addresses will be kept confidential)

I. Personal Information

Quiltmaker's name: _____

Address: _____

City: _____ State: _____ Zip: _____

County: _____ Phone # _____

Former residences (city, county, state, dates):

Date of birth: _____ Date of death (if applicable) _____

Ethnic background: _____

Education: _____

Occupation: _____
(if retired, please give former occupation)

Religious affiliation: _____

Father's name: _____ Mother's name: _____

Father's occupation: _____ Mother's occupation: _____

Spouse's name: _____

Spouse's occupation: _____

Date of marriage(s): _____

Children's names and birthdates:

II. Quiltmaking Activities

At what age did the quiltmaker begin quilting? _____

How many quilts has the quilter made? _____

Are there any other quiltmakers in the family?
If yes, please list name and relationship:

How did the quiltmaker learn to quilt?

Did the quiltmaker take lessons/ classes? If yes, please list teacher's name(s) and location(s):

Did/ does the quiltmaker belong to a quilting group?

If yes, please list group name(s) and locations(s):

What are the main activities of the group?

Have you/ has the quiltmaker ever sold quilts or quilted for hire?

If yes, please describe:

Have you/ has the quiltmaker ever taught quilting?

If yes, please describe:

What types of quilts do you/ did the quilter make?

- | | | | | |
|--------------------------------------|---|---------------------------------------|---|-----------------------------------|
| <input type="checkbox"/> Traditional | <input type="checkbox"/> Appliqued | <input type="checkbox"/> Bed quilts | <input type="checkbox"/> Wall quilts | <input type="checkbox"/> Other... |
| <input type="checkbox"/> Innovative | <input type="checkbox"/> Embroidered or crazy | <input type="checkbox"/> Throw quilts | <input type="checkbox"/> Miniature quilts | |
| <input type="checkbox"/> Pieced | <input type="checkbox"/> Group or round-robin | <input type="checkbox"/> Baby quilts | <input type="checkbox"/> Quilted clothing | |

Any particular favorites?

Which techniques do you/ did the quilter use?

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> Hand piecing | <input type="checkbox"/> Machine quilting | <input type="checkbox"/> Fusible applique | <input type="checkbox"/> Straight-grain binding |
| <input type="checkbox"/> Machine piecing | <input type="checkbox"/> Tying | <input type="checkbox"/> Embroidery | <input type="checkbox"/> Hand drafting |
| <input type="checkbox"/> Foundation piecing | <input type="checkbox"/> Hand applique | <input type="checkbox"/> Photo transfer | <input type="checkbox"/> Computer drafting |
| <input type="checkbox"/> Hand quilting | <input type="checkbox"/> Machine applique | <input type="checkbox"/> Bias binding | <input type="checkbox"/> Other... |

Any particular favorites?

Which tools do you/ did the quilter use?

- | | | |
|--|--|--|
| <input type="checkbox"/> Sewing machine | <input type="checkbox"/> Cardboard templates | <input type="checkbox"/> Quilting hoop |
| <input type="checkbox"/> Rotary cutter | <input type="checkbox"/> Freezer paper | <input type="checkbox"/> Quilting stencils |
| <input type="checkbox"/> Plastic templates | <input type="checkbox"/> Floor frame | <input type="checkbox"/> Other... |

Any particular favorites?

Where do you/ does the quilter get patterns?

- | | | |
|--|---|--|
| <input type="checkbox"/> Draft original design | <input type="checkbox"/> Magazine | <input type="checkbox"/> Draft design from a picture |
| <input type="checkbox"/> Mail order | <input type="checkbox"/> Newspaper | <input type="checkbox"/> Draft design from another quilt |
| <input type="checkbox"/> Exchange or round-robin | <input type="checkbox"/> Kit | <input type="checkbox"/> Other... |
| <input type="checkbox"/> Book | <input type="checkbox"/> Adapt published design | |

Any particular favorites?

Section D: Quilt Description

Owner's name for quilt/quilt's pattern: _____

Common or alternate names: _____

Possible published source: _____

Predominant Colors: _____

Quilt started: _____ Quilt finished: _____

Made by: _____

Overall size: Width _____ Length _____

Quilt style (please check all that apply):

- | | | |
|--|---|---|
| <input type="checkbox"/> Block pattern | <input type="checkbox"/> Strip | <input type="checkbox"/> Pictorial - Personal or Family |
| <input type="checkbox"/> Allover pattern | <input type="checkbox"/> Narrative | <input type="checkbox"/> Pictorial - Landscape |
| <input type="checkbox"/> Medallion | <input type="checkbox"/> Pictorial - Political | <input type="checkbox"/> Wholecloth |
| <input type="checkbox"/> Crazy | <input type="checkbox"/> Pictorial - Historical | <input type="checkbox"/> Other... |

Block setting (please check all that apply):

- | | | | |
|--|------------------------------------|----------------------------------|-----------------------------------|
| <input type="checkbox"/> Straight | <input type="checkbox"/> Solid | <input type="checkbox"/> Sashed | <input type="checkbox"/> Zigzag |
| <input type="checkbox"/> Diagonal/On point | <input type="checkbox"/> Alternate | <input type="checkbox"/> Strippy | <input type="checkbox"/> Other... |

Number of blocks: _____

Block size: _____

Sashing style (please check all that apply):

- Plain Pieced Appliqued Cornerstones Inner Outer Other...

Sashing width: _____

Number of borders: _____ Number of pieces in backing: _____

Width and style of borders, from outer to inner:

Binding and edge style:

- | | | | |
|---|--|--|--------------------------------------|
| <input type="checkbox"/> Bias | <input type="checkbox"/> Back to front | <input type="checkbox"/> Unfinished/raw edge | <input type="checkbox"/> Embellished |
| <input type="checkbox"/> Straight grain | <input type="checkbox"/> Front to back | <input type="checkbox"/> Turned in | <input type="checkbox"/> Other... |

Binding width: _____

Shape of edge:

- Straight Scalloped T-cutout Sawtooth Embellished Other...

Edge embellishment:

- Ruffle Fringe Lace Cording Prairie Points Other...

Is the quilt signed and/ or dated?

Signature: _____ Method: _____ Location: _____

Date: _____ Method: _____ Location: _____

Techniques used in the quilt (please check all that apply):

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> Hand piecing | <input type="checkbox"/> Machine quilting | <input type="checkbox"/> Ink drawing/Painting | <input type="checkbox"/> Fusible applique |
| <input type="checkbox"/> Hand quilting | <input type="checkbox"/> Machine applique | <input type="checkbox"/> Stuffed work/Trapunto | <input type="checkbox"/> Other... |
| <input type="checkbox"/> Hand applique | <input type="checkbox"/> Tied/Tufted | <input type="checkbox"/> Open/Dimensional work | |
| <input type="checkbox"/> Machine piecing | <input type="checkbox"/> Embroidery | <input type="checkbox"/> Photography | |

Materials used in the quilt (please check all that apply):

- Top: Cotton Wool Velvet Chintz Other... _____
 Cotton/poly Linen Silk Rayon

Backing:

- Cotton Cotton/poly Wool Linen Silk Other... _____

Binding:

- Cotton Cotton/poly Wool Linen Silk Other... _____

Filling:

- No filling Cotton, with debris Wool Other... _____
 Can't tell Cotton/poly blend Blanket or flannel
 Cotton Polyester Another quilt

Embroidery thread:

- Cotton Wool Metallic Can't tell
 Silk Linen Synthetic Other... _____

Describe the quilting design, from the outer edge to the center (sketch if necessary):

- Elbow Continuous line
 Outline Not quilted
 Hanging grid Not described
 Parallel lines Other...

Number of quilting stitches per inch

(count one side only; please measure in two places): _____ and _____

Which of the following best describes the condition of this quilt?

- Unused Like new Almost new Moderate use Used much Worn Other...

Please include a photograph of the quilt and the quilter with this form.

Please return this form to:

Great Lakes Quilt Center
201 Central Services, MSU Museum
East Lansing, MI 48824-1045

Note: Section D of this form was adapted with permission from one developed by Jonathan Holstein. A version of his form originally appeared in The Quilt Digest, San Francisco: Kiracofe and Kile, 1983, pp. 67-69.

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MSU Museum QuiltLine: (517) 432-3800
e-mail: quilts@museum.msu.edu

print more copies of this form at:
<http://museum.msu.edu/glqc/MQP20%form>