Gravemarker Recording Form

Name of the Cemetery: __________________
Stone Number: ______________

<table>
<thead>
<tr>
<th>Type of Marker</th>
<th>Marker Material</th>
</tr>
</thead>
<tbody>
<tr>
<td>Headstone</td>
<td>Slate</td>
</tr>
<tr>
<td>Footstone</td>
<td>Soapstone / Schist</td>
</tr>
<tr>
<td>Tomb, Table, or Barrel Vault</td>
<td>Marble</td>
</tr>
<tr>
<td>Family Monument</td>
<td>Granite</td>
</tr>
<tr>
<td>Unmarked depression</td>
<td>Metal</td>
</tr>
<tr>
<td>Uncarved fieldstone</td>
<td>Other:</td>
</tr>
<tr>
<td>Oriented in which direction? (E, W, N, S)</td>
<td>Color of the stone:</td>
</tr>
</tbody>
</table>

Size of the marker:  
Above ground height: ______________  
Width: ______________  
Thickness: ______________

Shape of the marker:  
Rectangular: ______________  
Curved: ______________  
Three-dimensional: ______________

Condition of the stone:  
Inscription: Legible or Illegible  
Fallen or broken: Yes or No  
Overall condition: Excellent, Good, Fair, Poor

Photos taken:  
Number of photos: ______________  
Orientation of photos: ______________  
Negative/Photo number: ______________

Mortuary symbol:  
Skull, faces, or bones: Wreath  
Vegetation (e.g., ivy): Masonic Symbol  
Cross, Bible, or Angel: 3D statuary  
Dove, Lamb, or animal: Geometric symbol  
Urn and/or Willow Tree: Other:  
Lettering only (plain): Other:  
Above ground artifact:

Information Inscribed on the Marker

Name of the deceased: __________________
Date of Birth: __________________
Date of Death: __________________
Age: __________________
Inscription: __________________
Other Data (veteran?): __________________
Carver (if known): __________________

Date Form completed: ______
Form completed by: ______

Please contribute your data to “African-American Cemeteries in Albemarle & Amherst County”
www.virginia.edu/woodson/projects/aacaac