



EXCAVATION LEVEL FORM

Catalog # _____

Page _____ of _____

Site Name and Trinomial: _____ Area: _____

Unit #: N _____ E _____ Level and Elevation: _____

Excavated By: _____ Date Began: _____

Recorded By: _____ Date Ended: _____

Dirt Screened? Yes No Screening Method: Water Dry Mesh Size: 1/8" 1/4"

Excavation Method: Shovel Trowel Bamboo Other: _____

Soil Description: _____ Dry Moist

Changes from Previous Level: Soil Color Lighter Darker Unchanged _____

Matrix Texture Sandier Less Clay More Rock No Change Other: _____

Artifact Density Increased Decreased Remained the Same _____

In this Level: Rodent Runs were Absent Sparse Common Abundant _____

Artifacts were Evenly Distributed throughout Level Concentrated in One or More Areas or Strata

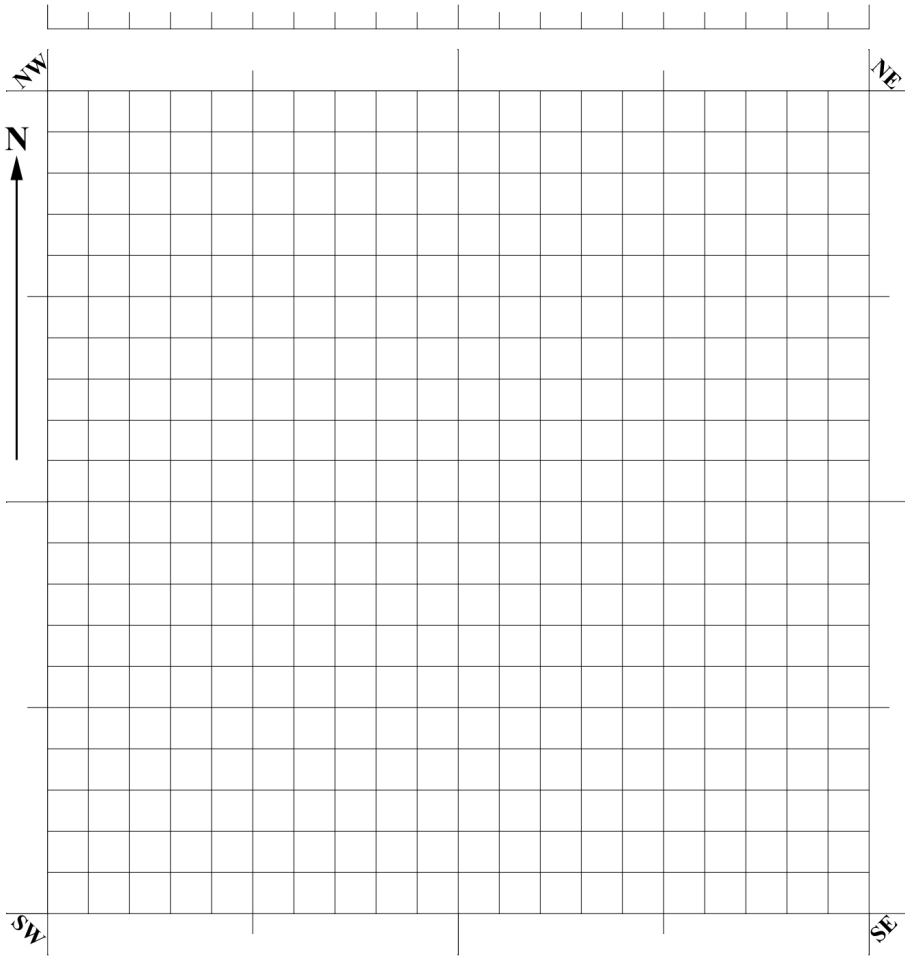
Explain Latter: _____

Were Floors and Walls Troweled for Features? Yes Feature Present? Yes Maybe No

Level Discussion: _____

Unit #: N _____ E _____ Level and Elevation: _____

Scale



Mapped Item	Elev. (cmbd)
1	_____
2	_____
3	_____
4	_____
5	_____
6	_____
7	_____
8	_____
9	_____
10	_____
11	_____
12	_____
13	_____
14	_____
15	_____
16	_____
17	_____
18	_____
19	_____
20	_____

ADDITIONAL NOTES: _____

Artifacts Recovered: Debitage Proj. Point Lithic Tool Bone Bone Tool Groundstone FCR Ceramics

Rim Sherd Shell Exotic Item: _____ Other: _____

Soil Samples 0 1 2 Charcoal Samples 0 1 2 _____ Photographs? Yes No

Other Samples? _____

Total # of Recovery Bags: 1 2 3 4 _____ Are Mapped Items Numbered and Wrapped in Foil? Yes

Are Proveniences on Paperwork and Recovery Bags Correct? Yes Supervisor's Approval: _____