

TEXAS CLOVIS FLUTED POINT SURVEY FORM

Sequence: \_\_\_\_\_  
(survey staff only)

County: \_\_\_\_\_

Please attach a tracing of the outline (or a photocopy) of both faces of the fluted point. Be sure to show the outline of the flute(s) broken areas, and the extent of edge grinding. If possible, please take measurements in centimeters.

1. Maximum Length	<input type="text"/>	2. Maximum width	<input type="text"/>
3. Width of base	<input type="text"/>	4. Distance from maximum width to base	<input type="text"/>
5. Maximum thickness	<input type="text"/>	6. Distance from maximum thickness to base	<input type="text"/>
7. Maximum flute thickness	<input type="text"/>	8. Basal concavity depth	<input type="text"/>
9. Obverse flute length	<input type="text"/>	10. Obverse flute width	<input type="text"/>
11. Reverse flute length	<input type="text"/>	12. Reverse flute width	<input type="text"/>
13. Number of flute obverse	<input type="text"/>	14. Number of flutes reverse	<input type="text"/>
15. Length of grinding left edge	<input type="text"/>	16. Length of grinding right edge	<input type="text"/>
17. Basal grinding	<input type="checkbox"/> Yes <input type="checkbox"/> No	18. Measurement in	<input type="text" value="cm"/> <input type="text" value="in"/>

19. More detailed information of where and when the point was discovered: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

20. Artifacts or features found with the point: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

21. Color and type of stone material: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please print name and address:

*Return completed form to:*  
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