



Scanning Order Form

Job Priority: Standard Rush

Customer Information:

Sold To: Residential Commerical

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Tel: () _____

Work Tel: () _____

E-mail: _____

Payment Method:

Credit Card:

MasterCard Visa American Express Discover Card

Account No: _____

Exp. Date: / /

Shipping Information:

Ship To: Same as Sold To Residential Commerical

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Tel: () _____

Work Tel: () _____

E-mail: _____

Shipping Method:

Federal Express 2 Day

UPS 3 Day

Ground Standard Overnight

Pick Up Priority Overnight

Computer Format Information: Mac PC Transfer File To: CD DVD FTP Customer Media

Original 1. Original Type: Slide Transparency Negative B&W Negative Print
Original Size: 35mm 4x5 Medium Format Other: _____
Scan To: _____ x _____ Resolution: _____ ppi

Artist Title or Description: _____
Instructions For ADI: _____

Original 2. Original Type: Slide Transparency Negative B&W Negative Print
Original Size: 35mm 4x5 Medium Format Other: _____
Scan To: _____ x _____ Resolution: _____ ppi

Artist Title or Description: _____
Instructions For ADI: _____

Original 3. Original Type: Slide Transparency Negative B&W Negative Print
Original Size: 35mm 4x5 Medium Format Other: _____
Scan To: _____ x _____ Resolution: _____ ppi

Artist Title or Description: _____
Instructions For ADI: _____

