

Name _____ Organization _____

Address _____ floor/suite# _____

City _____ State _____ Zip _____ Country _____

Phone _____ Fax _____ Email _____

 Fed-Ex account number _____ (or order will be mailed) Overnight ☐ 2-day ☐

 Payment (due with order) Check (from a U.S. bank) ☐ Mastercard ☐ Visa ☐

 Card Number _____ Expires / Month Year CVV Code _____

How will the photograph(s) be used? _____

Date of Request _____

Order Number	8x10 Digital Print \$30	11x14 Digital Print \$45	Digital Image* \$25	Digital Image* Higher-Res Rescan* \$40	Usage Fees	Cost

 * Select CD ☐ E-Mail (limit 10 images) ☐ FTP ☐ (To your server, please provide access information)

Subtotal

 Standard digital image is 8x10 300dpi Tiff format. Other formats can be provided upon request.
 Requests for larger sizes or resolutions will be billed at the Higher-Res Rescan rate.

CD (\$15)

 * **For Higher-Res Rescan,**
please provide desired specifications _____

Postage (\$10)

TOTAL

 If paying with a check, please mail this form and payment to:
 Photo Collection
 Los Angeles Public Library
 630 W. 5th Street
 Los Angeles, CA 90071

 If paying with a credit card, this form can
 be faxed to (213) 228-7419 or emailed to
 photos@lapl.org.