

# Order Form **(Printable)**

## 35mm Rolls Professional Service

Printed on Kodak Endura Luster Paper

Borders

35mm	3.5x5 single	3.5x5 double	4x6 single	4x6 double	5x7 single	5x7 double	Develop Only	Total
12-18 EXPOSURE	___ Rolls X \$6.00	___ Rolls X \$8.00	___ Rolls X \$8.00	___ Rolls X \$10.00	___ Rolls X \$10.00	___ Rolls X \$14.00	___ Rolls X \$4.00	\$ _____
24-27 EXPOSURE	___ Rolls X \$8.00	___ Rolls X \$11.00	___ Rolls X \$10.00	___ Rolls X \$13.00	___ Rolls X \$12.00	___ Rolls X \$16.00	___ Rolls X \$5.00	\$ _____
36-40 EXPOSURE	___ Rolls X \$11.00	___ Rolls X \$14.00	___ Rolls X \$13.00	___ Rolls X \$18.00	___ Rolls X \$16.00	___ Rolls X \$20.00	___ Rolls X \$6.00	\$ _____

Add A Photo CD	CD With Print Order	CD With No Prints	
Standard Res 4x6@300 DPI	___x\$4.00 per roll	___x9.00 per roll	\$ _____
Medium Res 7x10@300 DPI	___x\$8.00 per roll	___x11.00 per roll	
High Res 16x24@ 300 DPI	___x\$20.00 per roll	___x25.00 per roll	

Add an 8x12 Contact Sheet to above services

\_\_\_ Contact Sheets X \$8.00 Each \$ \_\_\_\_\_

Name: \_\_\_\_\_

Subtotal \$ \_\_\_\_\_

Phone# \_\_\_\_\_

Ohio Sales Tax 6.5% \$ \_\_\_\_\_

Email: \_\_\_\_\_

Ohio Residents only

### Shipping USPS

1st Class \$2/ Roll X \_\_\_\_\_ \$ \_\_\_\_\_

Express Mail \$10/order \$ \_\_\_\_\_

Subtract credits or coupons \$ \_\_\_\_\_

**Order Total** \$ \_\_\_\_\_

Pay with Credit Card or Check

See billing section on page 2

Questions? Call us M-F 9am - 7pm EST  
The Photo Place  
330-799-7771

Special Instructions

Submitting any film, print, slide, or negative to this firm for processing, printing or other handling constitutes an AGREEMENT by you that any damages or loss by our company, subsidiary or agents, even though due to negligence or other fault of our company, subsidiary or agents, will only entitle you to replacement with a like amount of unexposed film and processing. Except for such replacement, the acceptance of the film, print, slide, or negative is without other warranty or liability, and recovery for any incidental or consequential damages is excluded.

Cut out this address label and use it to send us your film

**The Photo Place, Inc.  
480 S Canfield - Niles Rd.  
Youngstown, Ohio 44515**

Cut here, complete the lower part of the form, and include it with your order

**Your Return Address Label**

The Photo Place, Inc.  
480 S Canfield Niles Rd  
Youngstown, Ohio 44515

**TO:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Billing Information**

**Order Total  
From Page 1**  
\$ \_\_\_\_\_-\_\_\_\_\_

Pay by  
Check   
Credit Card

Visa®  MCard®  Amex®

\_\_\_\_\_

Credit Card Number

\_\_\_\_\_

Expiration Date

\_\_\_\_\_

Security Code

Email Address

\_\_\_\_\_

Phone(s)

( ) \_\_\_\_\_-\_\_\_\_\_

( ) \_\_\_\_\_-\_\_\_\_\_

Signature \_\_\_\_\_

Credit Card Billing Name & Address

\_\_\_\_\_  
\_\_\_\_\_  
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