

**Photograph Duplication Request
Special Collections**

Date: _____

Name: _____

Please print: Last name, first, initial

Mailing address: _____

City, state, zip: _____

Telephone: _____

Notice: WARNING CONCERNING COPYRIGHT RESTRICTIONS

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I have read the above NOTICE and I hereby request one Photograph Duplication of each of the items described below. These materials are for my exclusive use, for the sole purpose of research or study convenience. I understand that I am responsible for complying with the laws governing copyright and literary property rights.

Signature _____

Date _____

Source of photograph to be duplicated: Name of collection, Box #, File #, Picture Collection #, etc.

Item Description _____

Number _____

NOTE: Payment for copying services is due when request is presented to Special Collections staff.

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