

Johnson County Archives  
Request for Digital Photo Reproductions

Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_  
Zip Code: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Statement of Use: \_\_\_\_\_  
\_\_\_\_\_

**Photograph Reproductions**

Resource ID Number	Title	Price *
JCA -		
JCA -		
JCA -		
JCA -		
JCA -		
JCA -		

\* Price per image: \$15.00 = \$ \_\_\_\_\_  
Processing fee: + \$ 10.00  
Total Amount Due: \$ \_\_\_\_\_

Payment must be made before photographic images are shipped.

Checks must be made payable to the: **Johnson County Archives**.

I have read the Rights Statement of the Johnson County Archives and agree to the provisions therein.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_