

120/220 Medium Format Film, Color, B&W or Slide reprints and enlargements.

Chose your negative number, print size and price from the chart below. Total each row and then total below with shipping. *NOTE: Use multiple forms if you have two or more negatives with the same number. Attach the corresponding negatives in an envelope with the correct form.*

Name _____ Phone number _____

Negative number	Size	QTY	Price	Total	Print Sizes	
					2 wallets	85¢
					3 1/2 X 5	59¢
					4X4	69¢
					4X5 or 4x6	79¢
					4X7 or 4X8	95¢
					4X10 PANO	\$1.25
					5x5	\$1.50
					6X6 or 5X7	\$3.99
					6X8	\$4.50
					8X8	\$6.99
					8X10	\$7.99
					10X10 or 8X12	\$8.25
					10X12	\$9.99
					10X13	\$10.99
					12X12 or 10X15	\$12.99
					11X14	\$12.99
					11X17	\$14.99
					12X18	\$16.99
					16X16 or 16X20	\$29.99
					16X24	\$29.99
					18X24	\$35.99
					24X24 or 20X30	\$39.99
					24X36	\$44.99
Add a Photo CD of my prints				\$7.99=		
Shipping: \$4.99 standard/ \$12.99 Priority USPS						
TOTAL of all						

SELECT Matte Glossy Borderless Border

LIMIT OF LIABILITY: Submitting any tangible or electronic media, image, data, file, card, disc, device, film, print, slide or negative for any purpose, such as processing, printing, duplication, alteration, enlargement, storage, transmission, or other handling, constitutes an AGREEMENT that any loss or damage to it by our company, subsidiary or agents, even though by our negligence or other fault, will only entitle you to replacement with an equivalent quantity/size of unexposed photographic film or electronic media, and processing of the replacement media. Except for such replacement, our acceptance of the media, image, data, file, card, disc, device, film, print, slide or negative is without other liability, and recovery for any incidental or consequential damages is excluded. No express

Use this label for mailing



Cooper's Imaging

Division of Photosmith

P.O. Box 67
Dover, NH 03821

Fill out this label with your shipping address and include it with your order.

<p>Cooper's Imaging - Photosmith P.O. Box 67 Dover, NH 03821</p> <p>TO:</p> <hr/> <hr/> <hr/>

Billing Information

Check-make payable to: Photosmith Credit Card

American Express® VISA® MasterCard®

Customer name & address
**MUST MATCH CREDIT CARD INFO*

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Card Number

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Expiration Date

Signature

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Card Security Code

Amex 4 digit on front



Visa & MC 3 digit on back

Phone numbers () ---

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E-MAIL