

reserves the right to decline orders if, in its judgment, fulfillment of the order would cause damage to the involve violation of copyright law. The photographs, slides, and digital files produced may be protected by (Part 17, U.S. Code) and are for educational purposes only. The Art Institute of Chicago does not transfer action rights and assumes no responsibility for the violation of copyright.

Name _____
 to reproduce any part of the materials ordered on this form without express written permission from the Address _____
 id copyright. I agree to contact the Ryerson & Burnham Archives (rbarchives@artic.edu) if the image will be
 ublication.
 City _____ State _____ Zip Code _____

Telephone _____ Email _____
 RE DATE _____
 Account number (Art Institute accounts only) _____

R&B ARCHIVES PHOTOGRAPHY FEES:

FORMAT OPTIONS	PRICES	PROCESSING TIME
New Image: 300 dpi (publication quality) digital file on CD-ROM or via digital delivery	\$30.00 each	15 working days
New Image: 300 dpi (publication quality) digital file on CD-ROM plus an 8"x10" digital print	\$40.00 each	15 working days
Existing Image: 300 dpi (publication quality) digital file on CD-ROM or via digital delivery	\$15.00 each	15 working days
Existing Image: 300 dpi (publication quality) digital file on CD-ROM plus an 8"x10" B&W or Color print from digital file	\$25.00 each	15 working days

LIBRARY IMAGE PHOTOGRAPHY FEES:

FORMAT OPTIONS	PRICES	PROCESSING TIME
300 dpi (publication quality) digital file on CD-ROM or via digital delivery	\$15.00 each	15 working days
300 dpi (publication quality) digital file on CD-ROM plus an 8"x10" digital print	\$25.00 each	15 working days

OTHER FEES:

FEES	PRICES
Set-up fee for R&B Archives material over 11"x17"	Contact Archives Staff
Mailing fee (per order)	\$5.00 (U.S.) / \$15.00 (Other)
Bibliographic fee (phone/mail/email orders only)	\$25.00

FOR LIBRARY USE ONLY:

Approved by / Date _____
 Date needed _____
 Photography fee \$ _____
 Mailing fee \$ _____
 Bibliographic fee \$ _____
 TOTAL FEE \$ _____
 Pick-up Mail E-Delivery Paid Bill

FOR IMAGING USE ONLY:

Job Number _____
 RY Work Number _____
 Date Received _____
 Date Completed _____
 TOTALS:
 Digital files _____
 Digital prints _____