

Name _____ Date _____
PLEASE PRINT EXTREMELY NEATLY

Email _____ Phone _____

PROCESS FILM Tell us how many and what kind of film enclosed

Film type	35mm	120	220	# of Rolls	Push/Pull
Color (C41 + disposable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
BW (black & white)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
E6 (color slide)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

SCAN FILM (choose size and format)

SCAN SIZE & FORMAT		SIZE OF SCAN	COST
<input type="checkbox"/> Standard.jpg	<input type="checkbox"/> Standard.tiff	3.7 to 4.8 mb	medium \$
<input type="checkbox"/> High.jpg	<input type="checkbox"/> High.tiff	12 to 18 mb	large \$\$
<input type="checkbox"/> Pro.jpg	<input type="checkbox"/> Pro.tiff	48.8 to 87 mb	huge \$\$\$

=> If you order scans (above) they are delivered by We Transfer link in email.

PRINTS

BORDERS SURFACE

<input type="checkbox"/> 4 x 6	<input type="checkbox"/> Borderless	<input type="checkbox"/> Matte (N)	4x6 = 35mm format
<input type="checkbox"/> 4.5 x 6	<input type="checkbox"/> White border	<input type="checkbox"/> Glossy (F)	4.5 x 6 = 120 (645, 6x7)
<input type="checkbox"/> 5 x 5	<input type="checkbox"/> _____		5x5 = 120 square

OTHER BORDER

Note: If your film size is not proportional to your print size, your borders will not be even.

PACKING (How we cut & sleeve your film)

CUT in archival plastic UNCUT in plastic sleeve TOSS my negatives page (default) (not recommended)

BUY FRESH FILM Lots more film stock available, just ask!

FILM DESCRIPTION	QUAN	35mm	120
<input type="checkbox"/> PORTRA 160	_____	\$10.99	\$10.99
<input type="checkbox"/> PORTRA 400	_____	11.99	10.99
<input type="checkbox"/> TRI-X 400	_____	8.99	9.75
<input type="checkbox"/> HP5 400	_____	7.99	6.50
<input type="checkbox"/>	_____	35mm	120

FILM PRICES SUBJECT TO CHANGE

PAYMENT INFORMATION

FOR FASTEST SERVICE PLEASE PROVIDE YOUR PAYMENT INFORMATION ON THIS FORM IF WE ALREADY HAVE YOUR INFO, YOU DON'T NEED TO ADD IT AGAIN, WE'RE GOOD!



Name _____
PLEASE PRINT EXTREMELY NEATLY

Address _____ This is also my shipping address

City _____ State _____ Zip _____

VISA MC AMEX Phone: _____ Call me for this information

CC# _____ ON FILE

EXP _____ CVV _____

CHOOSE SHIPPING During the quarantine we will ship your order back unless you request pickup in lab.


SHIP TO ME SHIP TO SOMEONE ELSE PICK UP IN LAB

Name _____

Address _____ Same as above

City _____ State _____ Zip _____

LEAVE US A NOTE

PHOTOLABORATORY LLC
2235 FIFTH STREET
BERKELEY, CA 94710

9471022168