Order No. _____

PR ☐ GR ☐ HBCA ☐

ARCHIVES OF MANITOBA

REQUEST FOR MOVING IMAGE AND SOUND REPRODUCTIONS

Date Ordered: _____ **Date Required:** _____

Name: _____ **Will pick up** ☐ **Deliver by mail** ☐

Address: _____ **GST exempt** ☐ **PST exempt** ☐

Phone: _____ **Reproductions produced for the purpose of:**

Fax: _____ ☐ research or private study

Email: _____ ☐ publication, exhibit, and film or for any purpose other than research or private use

NOTES:
The Archives of Manitoba provides limited in-house copying of moving image and sound records.
Please consult the *Guide to Moving Image and Sound Reproduction Services* for further information.
Reproductions of some formats, large orders, and rush requests may be outsourced.
The client will be charged directly by the reproduction house for studio time, shipping and handling charges and cassette costs.

Location Code	Description (title, date)	# of items

STAFF USE ONLY Completed: _____

Visit ☐ Mail ☐ Email ☐ Phone ☐ Fax ☐ Archives ☐ Date: _____

Revised 2011-05-03

ARCHIVES OF MANITOBA
REQUEST FOR MOVING IMAGE AND SOUND REPRODUCTIONS

Location Code	Description (title, date)	# of items

Revised 2011-05-03