



Duplication Request

Complete and submit this form to request a DVD copy of any non-copyright protected material produced by TV10. There is a small processing fee of \$10 per copy. Please allow two weeks for duplication processing.

Contact Information:

Name:

Address:

Phone Number:

Email:

Program Information:

Program Title:

Program Air Date *(if known)*:

Program Description:

How will the production be used?

- Personal Use Other *(please explain)*

Fee Schedule:

Quantity: _____ x \$10 *(per copy)* = _____ *(total price)*

Checks or Money Orders payable to the City of Mount Vernon are acceptable forms of payment. Questions or comments may be directed to the Finance Department at (360) 336-6207 or mvfinance@mountvernonwa.gov

Return this completed form to:

Finance Department
910 Cleveland Avenue
P.O. Box 809
Mount Vernon, WA 98273

Staff Use Only

Order Received _____ Received by _____ Processed to Station _____
Received by Station _____ Processed for delivery _____ Notified of availability _____
Tape length _____ Other note _____