

Duplication Work Order
Special Collections, University of Maryland Libraries

Name	Address (incl. City, State Zip)	Phone/Fax	Email

Special Instructions:

In submitting this request, I signify my understanding of the following:

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This institution may refuse to fulfill a work order if it determines that copying would damage the original materials.

Collection Title: _____

Series	Box/Reel	Folder/BookTitle/Photo	Description of Item/Pages	# of Pages
PAYMENT BY CASH, CHECK OR MONEY ORDER IS PREFERRED Checks may be made payable to the University of Maryland Payment by credit card and by bank wire transfer is also possible. There is a \$15.00 surcharge for bank wire.			Total number of pages: Total cost:	

Patron Signature		Date	
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