

The Shutterbug

FILL THIS OUT AND INCLUDE WITH FILM ORDER

**ADDRESS PACKAGE TO:
3932 Commercial Street
SE, Salem OR 97302**

FIRST + LAST NAME _____

PHONE # _____

EMAIL _____

SERVICE (CIRCLE 1):

DEVELOP ONLY

DEVELOP & SCANS

DEVELOP & PRINT

DEVELOP +SCANS PRINT

FILM TYPE (CIRCLE):

COLOR 35MM

COLOR 120

BW 35MM

BW 120

ROLL QUANTITY: _____

DO YOU WANT YOUR NEGATIVES BACK? _____

**WHICH STORE WOULD YOU LIKE TO PICK YOUR
NEGATIVES UP FROM? (WHEN WE OPEN AGAIN)** _____