

Image Request Form

Name			
	bal Affiliation		
Address			
Telephone	Email		
Intended Use:	() Commercial() Nonprofit/Cultural Institution() Other	()Educational ()Government	
Title of Publication	n/Exhibit		
Publication Date _			
Images Requested	:		
1			
2			
3			
	sted		
	Requested		
Office Use Only:			
Date of Response: _	Name of Staff Member:		
	Approved () Not approved		
Images Provided (Ac	cession #, Catalog #)		
Time Spent on Requ	est:		
How Researcher was	s Contacted:		
Additional follow-up	needed:		
If yes, specify:			

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