



# TV 10: Duplication Request

This Dub Request form must be completed to request a copy of a non-copyright protected TV-10 video production. The fee schedule is shown below. Please allow two weeks for duplication processing.

Production Title \_\_\_\_\_  
Production Air Date (if known) \_\_\_\_\_  
Brief Description of Production \_\_\_\_\_  
\_\_\_\_\_

Name of person requesting DVD \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ E-mail: \_\_\_\_\_

Address: **Please Fill Out Below**

Format: DVD

How will the production be used?

Personal Use       Other (please explain) \_\_\_\_\_

### Fee Schedule:

**Quantity:** \_\_\_\_\_ x \$10 (each) = \_\_\_\_\_ (total price)

Checks or Money Orders payable to City of Mount Vernon are acceptable forms of payment.

Questions or comments may be directed to the Finance Department

### Return this completed form to:

Finance  
910 Cleveland Avenue  
P.O. Box 809  
Mount Vernon WA, 98273  
360-336-6207  
[mvfinance@mountvernonwa.gov](mailto:mvfinance@mountvernonwa.gov)

### Your Mailing Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Staff Use Only

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