



# CITY OF LAWDALE MEDIA DUPLICATION REQUEST FORM

14717 BURIN AVENUE, LAWDALE, CALIFORNIA 90260  
PHONE (310) 973-3200, FAX (310) 644-4556

## 1. CUSTOMER INFORMATION:

NAME:		DATE:	
ADDRESS:			
CITY:		STATE:	ZIPCODE:
PHONE:	EMAIL:		

2. CHOOSE MEDIA FORMAT: DVD  \$1.00 each VHS  \$0.75 each

## 3. PROGRAM INFORMATION:

QTY	PROGRAM DESCRIPTION	PRICE	AMOUNT

TOTAL AMOUNT \$ \_\_\_\_\_

## 4. VERIFICATION OF PROGRAM AVAILABILITY

CATV STAFF SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

PLEASE ALLOW UP TO 10 DAYS FOR FULFILLMENT \*see Govt. Code §§ 6250 - 6276.48) for details  
DVD OR TAPES WILL BE AVAILABLE FOR PICK UP AT:  
LAWDALE CITY HALL - 14717 BURIN AVENUE, LAWDALE, CALIFORNIA 90260

- **VHS NOTE:** Programs with running times greater than 2 hours will be recorded in EP mode.
- **DVD NOTE:** Programs with running times greater than 2 hours will experience some compression and digital artifacts that can appear to slightly degrade the image quality.
- Limit one program per tape or disc
- Media duplication is provided in accordance with **California Public Records Act. GOVT . CODE. §§ 6250 - 6276.48**
- Full payment must be received before DVD or VHS media is generated.

## 5. PAYMENT - Cashier's Check or Money Order Only\*

MAKE PAYABLE TO: CITY OF LAWDALE

REMIT PAYMENT TO:

City of Lawndale  
14717 Burin Avenue  
Lawndale, CA 90260

(\*Personal Check with ID, Cash or Credit Payments can be made at the Lawndale City Hall Cashier's window)

6. CITY STAFF SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

All orders must include date and name of staff member who receives payment.