

Thumbnail Request Form – Butler County Gallery


	Item Number	Office Use	Name / Title of Picture
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- Contact us for larger request or if you need them in a hurry.
- We will email you when the images are posted to the website.

Customer Information

*Last Name _____	*First Name _____
*Street _____	
*City _____	*State _____ *Zip _____
*Phone _____	Email _____
* Required – orders will not be processed without this information. Can be omitted on additional copies of this form.	

Submit the completed form using one of these methods:

- By email to: **butlercountygallery@outlook.com**
- Drop off the completed form at the front desk of the **Hruska Memorial Library**
- Mail with check made out to **Boston Studio Project** to this address 

Hruska Memorial Library Boston Studio Project 399 N 5 th ST David City, NE 68632
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