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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| SEAL31.TIF | | **REQUEST FOR SERVICES**  State Form 56676 (6-19)  Approved by State Board of Accounts, 2019  Pursuant to IC 5-15-5.1-5(a)(16) | | | | | | | | **INDIANA ARCHIVES AND RECORDS ADMINISTRATION**  **STATE IMAGING AND MICROFILM LABORATORY**  100 North Senate Avenue, Room N055  Indianapolis, IN 46204  Telephone: (317) 232-3381  Fax: (317) 233-0908  Website: [www.in.gov/iara/2341.htm](http://www.in.gov/iara/2341.htm) | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| *INSTRUCTIONS: Please complete all applicable fields and review to ensure they are completed correctly. Incomplete forms will be returned.*  *Please see the* [*complete price list*](https://www.in.gov/iara/files/IARA%20SIML%20%20Price%20List%207-10-18.pdf) *on our website.*  *NOTE: All filming will be completed at the State Imaging and Microfilm laboratory and will meet the requirements of 60 IAC 2.*  *Storage of master film in the Indiana Archives and Records Administration vault is provided at no additional cost.* | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | |
| **AGENCY INFORMATION** | | | | | | | | | | | | | | | | | |
| Name of requestor | | | | | | | | Telephone number of requestor  (     ) | | | | | Date of request *(month, day, year)* | | | | |
| Name of agency | | | | | | | | Name of division | | | | | | | | | |
| Address of agency *(number and street, city, state, and ZIP code)* | | | | | | | | | | | | | | | | | |
| Project number | Activity number | | Source number | | Category number | Subcategory number | | | Locality number | Business unit | | Fund | | | Department | Program number | |
| Title of record series | | | | | | | | Record series number | | | | | Number of boxes | | | | |
| Signature of requestor | | | | | | | | | | | | | Date signed *(month, day, year)* | | | | |
|  | | | | | | | | | | | | | | | | | |
| **REQUESTED SERVICES** | | | | | | | | | | | | | | | | | |
| **Preservation Microfilming Services** | | | | | | | | | | | **Cost** | | | | **Quantity** | | **Total** |
| 16 mm – Standard size documents, up to legal size (8.5” x 14”), per image, minimum 1250 images | | | | | | | | | | | .03 | | | |  | |  |
| 35 mm – Books, newspapers, etc. (Anything larger than 14”), per image, minimum 250 images | | | | | | | | | | | .205 | | | |  | |  |
| 16 mm Diazo Negative Copy | | | | | | | | | | | 11.00 | | | |  | |  |
| 16 mm Process and Duplicate Only | | | | | | | | | | | 13.35 | | | |  | |  |
| 16 mm Silver Duplicate, Negative Only | | | | | | | | | | | 29.00 | | | |  | |  |
| 35 mm Diazo Negative Copy | | | | | | | | | | | 17.00 | | | |  | |  |
| 35 mm Process and Duplicate Only | | | | | | | | | | | 19.93 | | | |  | |  |
| 35 mm Silver Duplicate, Negative or Positive | | | | | | | | | | | 32.00 | | | |  | |  |
| **Scanning Services** | | | | | | | | | | |  | | | |  | |  |
| Standard Size Black and White Document, per image | | | | | | | | | | | .025 | | | |  | |  |
| Standard Size Color Document, per image | | | | | | | | | | | .12 | | | |  | |  |
| Large Format Black and White Document, per image | | | | | | | | | | | .26 | | | |  | |  |
| Large Format Color Document, per image | | | | | | | | | | | .52 | | | |  | |  |
| **Image Conversion** | | | | | | | | | | |  | | | |  | |  |
| Digital Files to Film (16 mm film) | | | | | | | | | | | 32.50 | | | |  | |  |
| Digital Files to Film (35 mm film) | | | | | | | | | | | 52.50 | | | |  | |  |
| Microfilm to Digital, 16 mm, per image | | | | | | | | | | | .02 | | | |  | |  |
| Microfilm to Digital, 35 mm (Bi-Tonal), per image | | | | | | | | | | | .035 | | | |  | |  |
| Microfilm to Digital, 35 mm (Gray Scale), per image | | | | | | | | | | | .14 | | | |  | |  |
| **Other Services** | | | | | | | | | | |  | | | |  | |  |
| Shipping – USPS, UPS | | | | | | | | | | | *Cost Varies* | | | |  | |  |
| Prep Work Charge, per Hour | | | | | | | | | | | 20.00 | | | |  | |  |
| 16 mm Jacket, per Jacket | | | | | | | | | | | .10 | | | |  | |  |
| Jacket Loading, per Roll | | | | | | | | | | | 25.00 | | | |  | |  |
| Cartridge, Leader and Trailer | | | | | | | | | | | 5.49 | | | |  | |  |
| Optical Character Recognition (OCR) Service, per image | | | | | | | | | | | .035 | | | |  | |  |
| Indexing, per Index Created | | | | | | | | | | | .10 | | | |  | |  |
| Compact Disc, Jewel Case, and Label | | | | | | | | | | | 4.43 | | | |  | |  |
|  | | | | | | | | | | | | | | | | | |
| ***FOR LABORATORY USE ONLY*** | | | | | | | | | | | | | | | | | |
| Date started *(month, day, year)* | | | | Starting roll number | | | Date completed *(month, day, year)* | | | | | | | Ending roll number | | | |
| Signature of Laboratory staff fulfilling request | | | | | | | | | | | | | | Date *(month, day, year)* | | | |
| Printed name of Laboratory staff | | | | | | | | Title of Laboratory staff | | | | | | | | | |