Reprint Order Form

Authors of work appearing in *American Literature* may obtain reprints by completing this order form and returning it to the address listed. (Others may also order reprints, but only after obtaining written permission from one of the authors. Non-authors must attach permission letters to this order form.)

Black and white articles are printed on high-quality 50 pound offset paper. Page counts over four are saddle-stitched in booklet format. Reprints are available with or without covers. Please allow four weeks from publication date for delivery.

Black and White Reprints

6 x 9 Trim Size

	No. of Pages								
Qty.	1-2	3-4	5-8	9-12	13-16	17-20	21-24	25-28	29-32
100	40	59	110	163	196	241	281	325	359
200	42	65	125	182	220	271	316	368	407
300	46	71	139	202	244	301	352	412	455
400	48	79	154	223	269	332	386	455	505
500	52	85	167	242	293	362	421	499	553
1,000	68	101	201	285	347	431	498	601	665

Additional Services

Title page with article title, author name, and reprint line; plus add one page to article page count:	\$11.11
Blue vellum covers with article title, author name, and reprint line; 100 covers add:	\$73.26
Blue vellum covers; add'l 100's add:	\$ 8.46

Ordering Information

All domestic and international orders **must** be paid in advance by check, money order, Visa, MasterCard or American Express. Checks and money orders should be drawn on a U.S. bank and payable in U.S. dollars to Sheridan Reprints.

Domestic orders will be shipped via UPS-ground service. International orders will be shipped via Parcel Post or Air Parcel Post. Please see order form for freight pricing information. If you prefer a different shipping method, or have any questions about your order, please contact **Cindy Eyler** at **800-352-2210 ext. 8008** or by e-mail at ceyler@tsp.sheridan.com.

Mail this order form to: Sheridan Reprints

450 Fame Ave. Hanover, PA 17331

Customer # 2510

Attn: Cindy Eyler Fax this form to: 717-632-8900

	d Issue #:					
	le:					
Author:						
	:					
Article Beg	gins on Page #:					
Bill To:	Name:					
	Company:					
	Address:					
	City/State or Country/Zip:					
	E-Mail: (please print)					
Ship To:	Name:					
	Company:					
	Address:					
	City/State or Country/Zip:					
	Phone:					
	E-Mail: (please print)					
	Number of Reprints Ordered:\$					
	Title Page:					
	Number of Covers: \$ Shipping: \$ \$					
	Shipping: \$					
	Total \$					
Internation	orders-UPS ground, add:					
ETHOD OF DAY	MENT					
ETHOD OF PAY heck One Box)	CARD NUMBER					
Payment E	nclosed					
heck or Money Orde	er.					
ade payable to neridan Reprints in	Expiration Date					
S. Funds.	Expiration Date					
VISA	Signature					
	PRINT Cardholder's Name					

____ AB-02