

C3SchoolPhotography.com

603-212-9090 \mid info@C3SchoolPhotography.com

1ST CHOOSE YOUR PACKAGE

| \$13 | Package 1 1-3x5 4 Wallets | |
|------|---|--|
| \$18 | Package 2 2-3x5s 4 Wallets | |
| \$27 | Package 3 1-5x7 2-3x5s, 8 Wallets | |
| \$38 | Package 4 1-8×10 2-5×7s, 8 Wallets | |

| | | \$48 | 16 Wallets | 4-3x5s | 2-5x7s | 1-8x10 | Package 5 |
|--------------|-----------------|---------|------------|--------|----------------|---------|-------------------------------|
| | i i | \$62 | 16 Wallets | 4-3x5s | 2-5x7s | 2-8x10s | Package 6 |
| V_{α} | | 484 | | | 2-5x7s, 4-3x5s | | Package 7 |
| | P13 | P12 | P11 | P10 | P9 | P8 | 2 ND |
| | P13 Portrait CD | 1-10x13 | 8 Wallets | 4-3x5s | 2-5x7s | 1-8x10 | 2 ND CHOOSE ADD ON |
| | \$35 | | \$12 | 0 8 | | \$15 | SNO |

| 3 RD RETOUCHING | Pre-Pay Instructions |
|---|---|
| | • Go to C3Photo.orderschoolpix.com |
| Add retouching to remove blemishes\$10 | Select your school from the gallery |
| Add Ephanood to some and blom inhad and offer also | •Password: School |
| Add Elifidiced to removed Diemisned and Soften Skin\$15 | Select your package and add-ons |
| *Does not take out glass glare or stray hairs | Secure checkout with a credit card |
| | Print, enclose receipt in order envelope, |
| | and give to photographer on picture day. |
| | |
| | |

Portrait packages must be ordered and paid for on Photo Day. Please make checks payable to C3 Photography. 100% Satisfaction Guaranteed or Your Money Back!

C3 School Photography | 59 Stiles Road, Salem, NH 03079 | 603-212-9090 | C3SchoolPhotography.com

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lacktriangle Please remove envelope at perforation and insert checks or cash for payment. Moisten the glue strip and seal lacktriangle

Please print clearly.

| Total Paid | | Enhanced \$15 | Retouching \$10 | 3rd Retouching | | Package 7 \$84 | Package 6 \$62 P13: Portrait CD \$35 | Package 5 \$48 P12: 10x13 \$18 | Package 4 \$38 P11: 8 Wallets \$12 | Package 3\$27 P10: 4-3x5s\$12 | Package 2 \$18 P9: 2-5x7s \$12 | Package 1 \$13 P8: 8x10 \$15 | 1st Package 2nd Add Ons | 4 TH MARK YOUR CHOICES |
|------------|-----------------|---------------|-----------------|----------------|-----------------------------------|----------------|--------------------------------------|--------------------------------|------------------------------------|-------------------------------|--------------------------------|------------------------------|-------------------------|-------------------------------|
| | Exp. Date | | CC# | | ☐ Cash (Please have exact amount) | City | | Address | | Parent's Name | | Grade | | Student's First Name |
| | * Security Code | | | | ☐ Check ☐ Credit Card | State Zip | | | | Phone | | Teacher/Homeroom | | Last Name |

File #

Individual File #

Color