FAIR COVERAGE DOT COM

Request Form

IF A RUSH ORDER, PLEASE INDICATE	E HERE
Name of Client(s):	
	-
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Title:	
Genre (e.g., drama, comedy, horror/sci-fi):	
A brief description of material:	
Which type of service are you requesting?	
Standard Coverage (scripts and manuscript Development Coverage (scripts only) O Editorial Consultation (film & video projec	R
If this is a "Special Offer" (i.e., anything no please indicate which one in the space belo	
Length (pages or minutes, as applicable): _ Fee for Service: \$	

Paying Electronically via PayPal? Yes __ OR No (payment enclosed) ___

Has this material been registered with either the Library of Congress/Copyright Office or the Writers Guild of America? Yes __ OR No __

How did you learn about FAIR COVERAGE (please circle ALL that apply)?

Blackflix.com	Moviebytes.co	m Urban Insider
IFP	OBS	Webmovie.com
IMDb.com	Script PIMP	Word of mouth
Search engine (which one)		Other source (please explain)

Mail this form along with the Submission Agreement and your Material to the following address:

FAIR COVERAGE P.O. Box 2922 Culver City, CA 90231-2922

If paying by check or money order, please mail with the above items and make payable to FAIR COVERAGE.

PLEASE NOTE: All items must be received by Fair Coverage (for each submitted script or tape) before the service can begin.