



JOB SPECIFICATION REQUIREMENTS

Company/Individual Name
and address

Invoicing Address

Name of person requesting work

Contact Telephone Number

Description of work requested

Special Requirements

List enclosures

e.g. transcription tapes/manuscripts/..... etc

Is collection/delivery required
(within 20-mile radius of Somerton)

Yes

No

If sending by Royal Mail/Courier what is
the expected date of delivery

What date is the return of work required

Signature

Dated

Print Name

The signing of this document confirms that the Terms and Conditions and Pricing have been read and agreed with.