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Dr. W. Gutherie:

- Copy -

Photographer

Neg. No.

PHOTOGRAPHIC WORK ORDER

INTER-OFFICE

Birmingham News

Photographic Department

(THIS SIDE TO BE FILLED IN BY PERSON REQUESTING SERVICE)

Late of _____ No. of _____
Assign. Thur May 29 Time 9:30 a.m. Photos 1 copy

Column _____ Photos Used on: _____ Time or _____
Layout _____ News XXX Day or Date Sun Edition Dix

To work with _____ Authorized _____
Photographer for Bryant Signature _____

Meet at: Assignment () City Room () Dept. Charged editorial

SUBJECT

Dr. W. Nelson Guthrie

Methodist retirement home exec.

ADDRESS b/w print to Bryant and return original

REMARKS

(Photo identification and costs listed on back this order)

ED 1204A