

Colour Work Agreement Form



Form No: SN_Upw2000_F_CoW

If you have any problems or queries please contact the Production Editor for guidance (details can be found in the Instructions for Authors)

If you have submitted a manuscript that contains colour figures, it is the policy of the journal for authors to meet the full cost of colour reproduction. John Wiley & Sons Group of companies require you to complete this form. Please fill in your contact details and then complete the table as instructed.

Note: this form must be filled in for **all** manuscripts that have been submitted with colour work, even if you subsequently choose not to publish either in print or online in colour.

We are unable to process your manuscript until we receive your instructions. Please return this form as quickly as possible.

Journal name: _____

Corresponding Author: _____

Manuscript No/Title: _____

Who should be billed for this charge? Please supply below the name and the address of the payer.

Payer Name: _____

Payer Address: _____

Fax: _____ Tel: _____

e-mail: _____

Please now complete this table (Remember: only one 'X' per figure).

Figure Number	Column 1 Colour in print and online*	Column 2 Colour online ONLY	Column 3 Black & white in print and online
Costs	1st figure = £200 Subsequent figures = £60 each	Free	Free
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
Total number of figures of each type			

No. of colour figs	Cost	No. of colour figs	Cost
1	£200	6	£500
2	£260	7	£560
3	£320	8	£620
4	£380	9	£680
5	£440	10	£740

Column 1 total £ _____

VAT (if applicable) £ _____

Total: £ _____

<<<For internal use ONLY>>>				
JPCMS No	Journal acronym	Volume	Issue	Print run
Production Editor			Author Correspondence Attached <input type="checkbox"/> Y <input type="checkbox"/> N	

WHAT YOU NEED TO DO

Please complete the table on page 1, placing an 'X' in the relevant column for each figure. The costs are shown at the top of each column. Please calculate the total cost for each category at the foot of the table, and then add VAT if applicable (see below).

All customers MUST quote their VAT numbers

Customers in the UK: add VAT at the applicable rate. For the current UK VAT Rate, please refer to <http://www.hmrc.gov.uk/vat/forms-rates/rates/rates.htm#1>.

Customers elsewhere in the EU:

- *Customers registered for VAT.* Please enter your VAT details below (please note VAT will not be charged). If no VAT registration number is supplied, VAT will be charged.

VAT registration number: _____

If Exempt From VAT – Please attach a copy of the certificate to this form.

- *Customers NOT registered for VAT:* Add VAT at the applicable rate.

Customers outside the EU: No VAT applicable.

Payment by Credit Card (MasterCard/VISA/American Express)

John Wiley & Sons accepts payment in three major currencies:

Pounds Sterling, United States Dollars and the Euro. Please **indicate** which currency you would like to pay in .

Please note this section **must** be completed. If no preference is given, the payment will be taken in Pounds Sterling (£).

Pounds Sterling (£) / United States Dollars* (US\$) / Euros* (€) (tick one)

*Conversions from US\$ or € will be made at our monthly rate.

Name on card _____ Expiry Date _____ / _____

Cardholder address _____

Please debit my credit card number:

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

With the sum of _____

Signature of cardholder _____ Date DD / MM / YYYY

Note: payment by credit card can only be accepted if **all** sections are completed. Please use BLOCK CAPITALS where possible.

Payment by Purchase Order

If you are asking your university or institution to pay we require purchase order details

I attach order number _____ dated _____

Please post or courier all pages of your completed form to the production editor for your journal; contact details can be found in the instructions for authors.

Please note that electronic or faxed copies cannot be accepted. For queries, please contact the production editor for your journal. Contact details can be found in the instructions for authors.

Contact Details of the person completing this form in case of any queries:

Print Name: _____ Tel No: _____

Signature: _____ Date: DD / MM / YYYY

E-mail Address: _____ Manuscript No: _____