

Send to: 2205 First St. #104  
Simi Valley, CA 93085



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## Project Submission

Date Sent: \_\_\_\_\_

Requested Completion Date: \_\_\_\_\_

Customer Name: \_\_\_\_\_

Customer Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Customer Phone Number: \_\_\_\_\_

Customer Email: \_\_\_\_\_

**Product:**  DVD  CD  VHS  OTHER

**Job Type:**  Duplication (1-499)  Replication (500+)

**Number of Copies:** \_\_\_\_\_

<b>CD</b> <input type="checkbox"/> Bulk <input type="checkbox"/> Package Number of Panels for CD Insert: _____ Insert Style: _____ Traycard: <input type="checkbox"/> None <input type="checkbox"/> 1 Side <input type="checkbox"/> 2 Sides Case: <input type="checkbox"/> Jewel <input type="checkbox"/> Shell <input type="checkbox"/> Paper Sleeve Other: _____	<b>DVD</b> <input type="checkbox"/> Bulk <input type="checkbox"/> Package Exterior Wrap: Y N Inside Booklet: Y N Case: <input type="checkbox"/> Amaray <input type="checkbox"/> Paper Sleeve Other: _____
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**Price Per Copy:** \_\_\_\_\_ **Other** \_\_\_\_\_

NOTES: \_\_\_\_\_ **Total Cost Per Piece:** \_\_\_\_\_

Phone Quote  E-mail Quote  Other \_\_\_\_\_

### Disclaimer

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Signature: \_\_\_\_\_

Date: \_\_\_\_\_

