

Disc Repair Service Form [Form #3004]

1. Contact Information:

Main Contact Information:

Contact Name: _____
Company Name: _____
Phone: _____
Cell Phone: _____
Address: _____

Contact Email: _____

Ship to Information if different:

Contact Name: _____
Company Name: _____
Phone: _____
Cell Phone: _____
Address: _____

2. Order Information:

Check your quote carefully and verify it is correct before sending this order in. If the quote is incorrect please call your account representative to get an accurate quote before sending in your order.

Disc Repair service is \$34.95 for up to 10 discs, Each Additional disc is \$2.00

Your discs will be repaired and inserted into a free cake box and includes free ground return shipping (Contact your representative if new packaging is requested). Any mix of discs is acceptable: CD-ROM, CDR/RW, Music CD, DVD-ROM, DVD Movies, GAME Discs. Double-sided DVD discs count as two discs.

Account Rep.: _____ Quote/Order #: _____
of Discs for repair: _____
Order Description and detail of problems with discs: _____

3. Payment: We require all projects to be prepaid. Checks or certified funds are required methods. Orders will not be shipped unless payment is received in full.

Credit Card Payment: If you are paying by credit card, which has a different Bill to address than the Main Contact bill to address, please fill in Credit Card Bill to Address below.

Card #: _____ Card Bill to Address: _____
Expiration: _____
Name on Card: _____

***Credit Card CCV Code - Please note that an Account Representative will be calling for the 3 or 4-digit credit card security code. For your protection, do not write it on this form.**

4. Authorization

I have read and agree to the US Digital Media terms and conditions on www.cdrom2go.com/terms and authorize payment of card above.

Signature _____ Date: _____
Printed Name: _____ Title: _____