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CD/DVD Replication REORDER Form
[Form #2004]

www.CDROM2GO.com www.PremiumUSB.com

IMPORTANT: THIS FORM IS FOR REPLICATION REORDERS ONLY. THE ONLY CHANGE FROM YOUR ORIGINAL ORDER THAT IS ACCEPTABLE WITH THIS FORM IS QUANTITY. ANY OTHER CHANGES WILL REQUIRE YOU TO USE FORM #2002 REPLICATION ORDER FORM.

	ORIGINAL ORE	ER #	
Title of Project:	,		
		Current Quo	te #:
Requested Delivery Date:		Quantity:	
The date above is the latest you wish to have your project in hand by. Bulk Replication requires 7-10 business days for completion. Custom packages require 10-14 business days for completion.		Requested shipping method*	
		Ground	Customer Pick Up
		3-day	
*NOTE: If shipping method will not meet the requested delivery date, then the shipping method will need to be expedited in order for requested delivery date to be met. Additional fees may apply.		2-day	
		Overnight Sa	aver (by end of day)
		Overnight Next Day Air (by 10:30)	
An email proof for artwork verification mu Email Proof to this address:	· ·		<u>.</u>
3. Payment: USDM requires all projection will not be shipped unless payment is reconstructed by Purchase Orders are allowed for presentate, Local or Federal governments.)  P.O. # Chemical Chem	ceived in full. approved terms custom	<b>ers only.</b> (i.e. Pub	lic Schools, State Colleges/Universities
will not be shipped unless payment is rec <b>Purchase Orders are allowed for pre-a</b> State, Local or Federal governments.)	ceived in full. approved terms custom	<b>ers only.</b> (i.e. Pub	lic Schools, State Colleges/Universities
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will not be shipped unless payment is red  Purchase Orders are allowed for pre-a State, Local or Federal governments.)  P.O. # Che  4. Ship to address:  I would like to ship to the same ship to ac I would like to ship to a different address  5. Authorization:	ceived in full.  approved terms custom  eck #  ddress from my original order:  from my original order:  Order  al Media Inc. terms from m	ers only. (i.e. Pub	s (street address, city, state, zip)