e-k media

Date: ___/___/___

The only disc and tape replication center you'll ever need

Fax: 978-440-7639 • Phone: 800-729-4455
55A Union Ave. Sudbury MA 01776

Customer Info

Customer's PO # _____

Ship to:

Attn _____
Address 1 _____
Address 2 _____
Town _____ State _____ Zip _____
Phone# _____ Fax# _____

Bill to:

Attn _____
Address 1 _____
Address 2 _____
Town _____ State _____ Zip _____
Phone# _____ Fax# _____

Order Info

Program Title: _____ **Program Length:** _____

Video / CD / DVD / Audio

Format:

Video

	QTY
NTSC	
PAL	
Secam	

CD

CD-R	
CD-ROM	
CD-Audio	
CD-Business Card	

DVD / DVD-R

DVD-5	
DVD-9	
DVD-R	

Cassette

Music	
Spoke Word	

Cassette Shell

White	
Clear	

Label Type:

Video

- Laser Face
- Laser Spine
- Custom Printed Face
- Custom Printed Spine
- Logo Scan
- Color

CD / DVD

- Color Ink Jet
- Laser Label
- Color Silk Screen 1 2 3 4 5
- ☐ Process PMS
- White Flood

(White Flood is to be counted as a color)

- Film Output

Cassette

- Imprinting
- ☐ 1 Side *or* 2 Sides
- Laser Label
- ☐ 1 Side *or* 2 Sides
- Custom Label

Packaging:

Video

4 Color Custom	None
Bottomload w/win	Supplied
Sideload	Other
Sideload w/win	
1/3 Plastic Case	
Full Plastic Case	
Shrinkwrap	

CD / DVD

Jewelcase	None
Tyvex Sleeve	Supplied
C-Shell	Other
Wallet	
Mailer	
Amoray	
Slimline	
Shrinkwrap	

Cassette

- J-Card : number of panels
- O- Card

Case

Norelco	None
Poly Cases	Supplied
Shrinkwrap	Other

Schedule / Shipping Info

Requested Delivery Date: ___/___/___ Shipping Method: _____

Master / Artwork

Type of Master:
Date Master to Arrive: ___/___/___

Return or Hold Master

Supplied Artwork: Yes / No
Date Art to Arrive: ___/___/___

Special Instructions: _____

Note: Please submit label copy with your order. Templates are available via the Web or by request from you sales rep.