

CD Duplication Order Form



Print this form out, fill in, sign and send with your Master CD to:

Digital Audio Recordings
404 Nikki Terrace
Leesburg, VA 20175

Orders will be processed and shipped within one (1) week.

Please Print Clearly.

Name _____ Phone # () _____

Company _____

Address _____

City _____ State _____ Zip _____

	Quantity	Price Each	Total						
Disc Copies									
Shipping/handling for Disc Transfers and Copies.		Shipping							
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">1 - 5 Copies = \$6.75</td> <td style="width: 50%;">101-250 Copies = \$28.75</td> </tr> <tr> <td>6-25 Copies = \$9.85</td> <td>251-500 Copies = \$40.25</td> </tr> <tr> <td>26-100 Copies = \$16.50</td> <td>500 & Up = Call</td> </tr> </table>		1 - 5 Copies = \$6.75	101-250 Copies = \$28.75	6-25 Copies = \$9.85	251-500 Copies = \$40.25	26-100 Copies = \$16.50	500 & Up = Call	Sub Total	
		1 - 5 Copies = \$6.75	101-250 Copies = \$28.75						
		6-25 Copies = \$9.85	251-500 Copies = \$40.25						
		26-100 Copies = \$16.50	500 & Up = Call						
Tax									
Total									

What do you want printed on the disc?

Line 1) _____

Line 2) _____

Line 3) _____

Please read and sign. I hereby authorize Digital Audio Recordings to duplicate this Disc. I own all rights to this disc and will not hold Digital Audio Recordings liable for copyright infringement. I assume full responsibility for obtaining releases when required for sale and distribution. I hereby agree that the handling, processing and packaging is without warranty or liability, even though defects, damage or loss by negligence or other fault may occur, furthermore, I agree to hold harmless and indemnify Digital Audio Recordings for any and all liability and/or claim arising from this transaction.

Authorized Signature _____ Date _____

Remarks _____