



ORDER FORM

Shipping and Billing Information:

Company Name _____ Contact Name _____

Today's Date _____ PO Number: _____

Payment Terms: ___ Net 30 Days (w/approved credit) ___ C.O.D. ___ Prepaid ___ Others
___ Credit Card # _____ Expiration Date _____

Bill To

Ship To

Shipping Method: FEDEX ___ Priority ___ Standard ___ 2nd day ___ 3 Days
UPS ___ Priority ___ Standard ___ 2nd Day ___ 3 Days ___ Ground
Other _____

Shipping Payment: Freight Collect, Acct# _____ Prepay (will be added to invoice) _____

Job Information:

Title of Product /Center Hub _____ (up to 70 characters) Quantity _____

Order Type: New Order _____ Re-Order _____ Turn Time: ___ Standard ___ # Days

CD-R Master will arrive at GENTEK Media Inc _____ (date) Required Delivery Date _____

DVD

____ DVD 5
____ DVD 9
____ DVD 10

Full Size CD-Rom

____ Data CD Rom
____ CD Audio
(Must include Play List)

Business Card CD Rom

____ PC Format
____ Macintosh Format
____ MB Card (Card Size)

Film/Artwork: ___ Film Positives Provided ___ Match print provided ___ Electronic Artwork Provided
(Required for 4 colors) (File name: _____)

Silkscreen Printing: ___ 4 color process, CMYK ___ white flood coat
___ Spot Colors, PMS# _____ white flood ___

Offset Printing: ___ 4 color process, CMYK + ___ PMS# or white flood coat

Additional Comments _____

Customer Signature _____ Date _____