

**CD/DVD DUPLICATION  
ORDER FORM**

**Productivity Central  
www.cddvdactory.com**

Please print out and fax to  
904-448-3103

**CUSTOMER INFO**

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Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Contact: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

**BILLING METHOD**

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NAME OF CARDHOLDER: \_\_\_\_\_

CARD #: \_\_\_\_\_

BILLING ADDRESS: \_\_\_\_\_

3 DIGIT CODE: \_\_\_\_\_

TYPE OF CARD: \_\_ VISA \_\_ AMEX \_\_ MASTERCARD \_\_ DISCOVER

EXP DATE: \_\_\_\_/\_\_\_\_

**OPTIONS** Please check all that apply

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COPY FORMAT

Audio CD

Data CD

DVD-R

CD IMPRINT

Color imprint/label

Black (Hi Resolution)

ARTWORK > Provide file as an 300 dpi (CMYK) on CD-R from template

PACKAGING

Paper sleeve with window

Printed CD Jacket

Shrinkwrap jewel

Jewel case

Amaray case

Slimline jewel case

Printed inserts / inlay

**DELIVERY INSTRUCTIONS**

**SPECIAL INSTRUCTIONS**

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Via: \_\_\_\_\_

Name: \_\_\_\_\_

Address 1: \_\_\_\_\_

Address 2: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

MASTER:  Keep  Return

**AUTHORIZING SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_