

## RECORDING REQUEST FORM

Company Name: _____		Contact Name: _____	
Address: _____			
City: _____	State: _____	Zip: _____	
Phone: _____	Fax: _____	E-mail: _____	

<p><b>BILLING INFORMATION</b> (if different)</p> <p>Company: _____</p> <p>Contact Name: _____</p> <p>Address: _____</p> <p>_____</p> <p>_____</p> <p>Phone: _____</p> <p>Fax: _____</p> <p>E-mail: _____</p>	<p><b>SHIPPING INFORMATION</b> (if different)</p> <p>Company: _____</p> <p>Contact Name: _____</p> <p>Address: _____</p> <p>_____</p> <p>_____</p> <p>Phone: _____</p> <p>Fax: _____</p> <p>E-mail: _____</p>
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<p><b>PO* (if required):</b> _____</p>	<p><b>Deliver by:</b>    <input type="checkbox"/> E-mail    <input type="checkbox"/> FedEx</p> <p>                         <input type="checkbox"/> Other: _____</p> <p style="text-align: right; margin-right: 50px;"><small>(Specify)</small></p> <p style="text-align: right;">Delivery Service Acct. #: _____</p>
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## RECORDING INFORMATION

Date Submitted: _____	Date Requested (if Rush Request): _____
Number of Pages including cover: _____	Number of Messages: _____
<input type="checkbox"/> New Messages or <input type="checkbox"/> Re-records	
Format to ship: <input type="checkbox"/> E-mail <input type="checkbox"/> CD <input type="checkbox"/> Tape: specify type _____ <input type="checkbox"/> Other: _____	
<small>(Specify)</small>	
Additional Comments: _____	
_____	
_____	
_____	

**Please Note:**

- Turn-around for 75 short messages or less is approximately 7-10 business days.
- Less than 7 days is a Rush request. For 24-48 hr. turn-around, contact for quote & availability.
- Turn-around for more than 75 short messages – contact for time estimate.
- Refer to "Scripting Requirements" for acceptable scripting.