



AUDIO & VIDEO DUPLICATION PRICE QUOTATION FORM

Company: _____

Name: _____ Phone Number: _____

Address: _____

Email: _____

Please select the options below so that we can configure your project, and provide you a price quotation.

DISC TYPE	CASE OPTIONS	INSERT OPTIONS	DISC SURFACE	PRODUCTION TIME
<input type="checkbox"/> CD	<input type="checkbox"/> Standard	<input type="checkbox"/> 2-Panel	<input type="checkbox"/> Full Color	<input type="checkbox"/> Rush – 1 Day
<input type="checkbox"/> CD No Content	<input type="checkbox"/> Clear Standard	<input type="checkbox"/> 4-Panel	<input type="checkbox"/> Black Text Only	<input type="checkbox"/> Priority – 2 Day
<input type="checkbox"/> DVD	<input type="checkbox"/> Jacket	<input type="checkbox"/> DVD Insert		<input type="checkbox"/> Standard – 5 Days
<input type="checkbox"/> DVD No Content	<input type="checkbox"/> Slim Black		ADD-ONS	
	<input type="checkbox"/> Slim Clear		<input type="checkbox"/> Bar Code	
	<input type="checkbox"/> Tyvek Sleeve		<input type="checkbox"/> Poly Wrap	
	<input type="checkbox"/> DVD Style			
<input type="checkbox"/> None	<input type="checkbox"/> None	<input type="checkbox"/> None	<input type="checkbox"/> None	

Project Name: _____

Total Price: \$

Units (Quantity): _____ at \$0.00 each.

Payment required for job production to begin:

All payment or 50% deposit is required up front, for first time clients, prior to the start of production with the balance due before shipping your final project to you.



We accept Visa, MasterCard, and American Express.



FOR YOUR DUPLICATION QUOTATION, YOU MAY FAX YOUR REQUEST TO:

508-824-1808

OR

EMAIL: Sales@absTechnologies.net