

Video Tape To DVD Order Form

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|---|------------------|--|
| Integrated Imaging 1743 East 2nd Street Casper, WY 82601 307-266-3805 ~ 1-800-780-3805 www.iilabs.com | Name: | |
| | Address: | |
| | City, State Zip: | |
| | Email: | |
| | Phone: | |

| | |
|--|--|
| Title for DVD Case _____ Other Instructions: If you order a mastered DVD, we need a menu title and chapter instructions. | Number of video tapes sent: _____ <input type="checkbox"/> Recorded DVD 2 hour mode (quality may suffer) <input type="checkbox"/> Recorded DVD 1 hour mode (Best Quality) <input type="checkbox"/> DVD Master 2 hour mode (quality may suffer) <input type="checkbox"/> DVD Master 1 hour mode (Best Quality) Number of DVD Duplicates from each DVD: _____ Number of cuts: _____ (used to combine 2 or more videos on 1 DVD) <input type="checkbox"/> Ground Shipping <input type="checkbox"/> 2nd Day Air <input type="checkbox"/> Next Day Air |
|--|--|

Payment Info: We accept Visa, MC, AmEx, Discover, Check or Money order
 Card Number _____ CVV* Code _____ Expires _____
 Signature _____
*The CVV code is a 3 or 4 digit security code on the back of v/mc/d and on the front of Amex cards

Check here and we will email your total and hold the job for a check, phone call, or you can pay online at: <https://www.iilabs.com/pay/>

FROM:

TO: Integrated Imaging
1743 East 2nd Street
Casper, WY 82601

Office use

| | | | |
|---------------------------|------------|-------|-----------------|
| DVDs: | | | |
| Number _____ | Type _____ | Total | \$ _____ |
| Number _____ | Type _____ | Total | \$ _____ |
| Number _____ | Type _____ | Total | \$ _____ |
| Other fees _____ | | Total | \$ _____ |
| | | Total | \$ _____ |
| Shipping and Handling fee | | | \$ _____ |
| Tax (Wyo Only) | | | \$ _____ |
| Total for Transfer | | | \$ _____ |