



Design2Sound.com
 1938 S. Myrtle Ave. 2nd Floor
 Monrovia, CA 91016

1-866-574-0275
 626 303-4114 Tel.
 626 236-5591 Fax.



ORDER FORM

CALL US WHEN YOU'RE READY TO ORDER
1-866-462-3244
 8 AM - 5 PM P.S.T

BILLING ADDRESS

Company _____
 Name _____
 Street _____
 City _____ State _____ Zip _____
 Phone _____ FAX _____
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SHIPPING ADDRESS (if different from billing address)

Company _____
 Name _____
 Street _____
 City _____ State _____ Zip _____
 Phone _____ FAX _____
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QUANTITY	DESCRIPTION	ITEM PRICE	TOTAL PRICE

Comment:

YOUR PAYMENT METHOD

Cash Money Order Check # _____
 Visa MasterCard American Express Discover

ENCLOSURES
 Disc _____
 Photos _____
 Deposit _____
 UPC / ISBN Code _____
 Typesetting Information _____

IMPORTANT NOTES

- All final payments must be cash, certified check, money order, Visa, MasterCard, or American Express unless prior arrangements have been made.
- D2S is not responsible for CD-R masters. It is industry practice to have a safety or backup. D2S is not responsible for original art.
- Your job will be delayed if you have failed to enclose all the necessary materials (input media & technical spec log, artwork, order form, deposit, etc.).

TOTAL _____
 DEPOSIT _____
 BALANCE DUE _____

Credit Card # _____

Expiration Date _____

Credit Card CVV # _____

NOTE: CVV #s for Visa/Mastercard last 3-digits on the back.
 American Express 4-digits on the front above the numbers

CARD BILLING NAME AND ADDRESS (if different from billing address above)

Name: _____
 Street: _____
 City: _____ State: _____ Zip: _____

Need finished product by
 D2S does not guarantee delivery times.

In order to receive my order in the time required, I authorize D2S to process my project without sending me proofs. Should there be any content errors on the CD or the graphics, I agree to accept and pay for the product regardless of their cause.

Signature _____
 Date _____