



The Tape Factory

(304) 428-7200 1-866-777-TAPE(8273)

Audio Transfer Order Form

Date _____
 Name _____
 PHONE _____
 RETURN SHIPPING ADDRESS
 Street Address _____
 City, ST ZIP Code _____

COMMENTS OR SPECIAL INSTRUCTIONS: (MORE SPACE ON BACK)

| CASSETTE TRANSFER | REEL TO REEL TRANSFER | ADDITIONAL CD COPIES | ADDITIONAL FLASH COPIES | AUDIO TAPE REPAIR |
|-----------------------------|--|----------------------|-------------------------|-------------------|
| To CD \$35 To Flash \$35 | 3" Reel \$35 5" Reel \$45 7" Reel \$50 | \$5 Each | \$10 Each | \$15 |

| DESCRIPTION | SOURCE QTY. | COVERSION PRICE | # OF CD COPIES | UNIT PRICE | # OF FLASH COPIES | UNIT PRICE | TOTAL |
|-----------------------------------|-------------|-----------------|----------------|------------|-------------------|-------------|-------------|
| <i>(Example) 3" Reel to Flash</i> | <i>2</i> | <i>\$35</i> | <i>0</i> | <i>0</i> | <i>2</i> | <i>\$10</i> | <i>\$90</i> |
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| SUBTOTAL | |
| SALES TAX | 7% |
| RETURN SHIPPING/HANDLING | \$10.00 |
| TOTAL DUE | |

\$10 Return Shipping/Handling, Except for local pickup and delivery.
Make all checks payable to The Tape Factory.
193 Meadville Road • Parkersburg, WV 26104



193 Meadville Road • Parkersburg, WV 26104
Phone: 304.428.7200
email: thetapefactory@yahoo.com

DAMAGE WAIVER

The Tape Factory will not be responsible for damage to any client master tapes, films, photos, slides, videos or materials. We will assure you that every precaution will be taken in safe handling of your property.

COPYRIGHT RELEASE

THE TAPE FACTORY WILL NOT BE HELD LIABLE FOR ANY DUPLICATION COPYRIGHT. YOUR PRINTED NAME, SIGNATURE, AND DATE BELOW INDICATES THAT AS OUR CLIENT, YOU OWN OR HAVE COPYRIGHT PERMISSION FOR DUPLICATION OF THE MASTER TAPE(S) LISTED BELOW.

I have read and understand the above DAMAGE WAIVER and COPYRIGHT RELEASE disclaimers and will not hold *The Tape Factory* liable for any damage to or copyright of the following tapes.....

TAPE TITLE/S OR PROGRAM/S:

Customer (please print)

Address _____

City _____ **State** _____ **Zip** _____

Telephone _____ **Email** _____

Customer Signature _____ **Date** _____

Signature/ Witness _____ **Date** _____