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	TM		
EXTREM	EREACH		
	connect and simplify.		

SPOT DELIVERY

ORDER FORM

PURCHASE O	DER # DATE ORDERED			ORDERED BY:				
PHONE #				AUTHORIZED BY:				
			SHIP TO:					
BILL TO:								
ATTN: (** See COD Form to fill out as well)			ATTN:					
DISTRIBUTION SERVICE:								
VIDEO SD	Check	for SD:						
VIDEO HD	Check	for HD:						
Note: 1 HOUR PRIORITY SERVICE NOT AVAILABLE FOR HD VIDEO SPOT DELIVERY								
QUANTITY								
QUANTITY	CODE NUMBER		TITLE					