

Midwest Productions - Video Transfer Order Form

Please complete this form and include with your order. If shipping order in multiple boxes, please include a copy of this form in each box.

CONTACT INFORMATION:					
Name:					
Address:					
City:		State:		_ Zip:	
Phone:		(day)	Phone:		(eve)
Cell Phone:		Email:			
TAPE INFOR	MATION: Numbe	r of tapes	Are tapes i	numbered? Yes 🗌	□ No □
STANDARD \	VIDEO TAPE:				
☐ VHS Qty		☐ MiniDV Qt	у	Digital 8 Qty	
☐ VHS-C Qty		☐ Video 8mr	n Qty	☐ Hi8 Qty	
SVHS Qty_		☐ MiniDVD (Qty	☐ Betamax Qty	
PROFESSIONAL VIDEO TAPE:					
☐ Betacam Q	ty	☐ BetacamS	P Qty	☐ Betacam SX Qty	
☐ Digital Beta	acam Qty	☐ DVCPRO	Qty	DVCAM Qty	
☐ Umatic (3/4	l") Qty	☐ PAL VHS	Qty	☐ MPEG IMX Qty _	
OTHER		Qty			
TRANSFER FORMAT: DVD FILE					
FILE TYPE:	☐ MP4 (H.264)	☐ ProRes	☐ MOV ☐ DV	∕.AVI ☐ Uncompr	essed AVI
☐ Will supply an EXTERNAL HARD DRIVE					
Disc Title:					
NOTE: All titles must be typed or clearly handwritten. Please use reverse side of this form or an additional sheet can be attached. Titles cannot be taken from tape(s).					
ADDITIONAL COPIES: DVD Copies OTHER					
Payment: Payment type: Money Order Credit Card: Master Card Cashiers Check Check Check (Requires 14 day clear period.) Which is a Check Check Check (Requires 14 day clear period.) Which is a Check Check Check Check (Requires 14 day clear period.) Which is a Check Check Check Check Check (Requires 14 day clear period.)					

Midwest Productions, Inc. 3 866-362-0662 (toll free) 3 www.midwestproductions.com 3 support@midwestproductions.com

NEW shipping address: 833 SW Lemans Lane #127 – Lees Summit, MO 64082