



Program Dub Request Form

Section #1			
Name:			
Address:			
Organization:			
Phone #:		Today's Date:	

Section #2			
Program Title:			
		Number of Copies:	Amount Due:
DVD:	\$20.00		\$
VHS:	\$15.00		\$

Section #3			
Total Amount Paid:	\$	Check #:	Cash
Date Completed:			
Completed by:			

**Dubs must be picked up within 30 days of their completion, or they may be recycled.
Please make checks payable to Quincy Telecommunications Corporation.**

