

SCANDOC IMAGING, INC.

500 SUPERIOR AVE., SUITE 320 • NEWPORT BEACH, CA 92663 • TEL: (949)650-9595 • FAX: (949)650-9594

REAL ESTATE ESCROW RUSH @ \$45.00+ ORDER DATE: _____
 MORTGAGE DUE DATE: _____

TRANSACTION FILE INFORMATION

CLIENT NAME: _____ FILE NO: _____
ADDRESS: _____ SUITE OR NO: _____
CITY: _____ STATE: _____ ZIP: _____
PHONE: _____ FAX: _____

REQUESTOR INFORMATION

REQUEST BY: _____ TITLE: _____
COMPANY: _____
ADDRESS: _____ SUITE OR NO: _____
CITY: _____ STATE: _____ ZIP: _____
EMAIL: _____ CELL: _____
PHONE: _____ FAX: _____

PICK UP LOCATION

OFFICE CONTACT: _____ TITLE: _____
ADDRESS: _____ SUITE OR NO: _____
CITY: _____ STATE: _____ ZIP: _____
EMAIL: _____ CELL: _____
PHONE: _____ FAX: _____
CROSS STREETS: _____

SCAN, ARCHIVE & CD CREATION INFORMATION

- | | |
|--|--|
| <input type="checkbox"/> COMPANY CD & CLIENT CD (\$95.00) | <input type="checkbox"/> RETURN ORIGINAL FILE |
| <input type="checkbox"/> COMPANY CD ONLY (\$90.00) | <input type="checkbox"/> SHRED FILE (Certificate of Destruction) |
| <input type="checkbox"/> ADDITIONAL CD (\$5.00) | <input type="checkbox"/> MAIL ALL CDS TO OFFICE ONLY |
| <input type="checkbox"/> USE CUSTOM TEMPLATE (\$29.99 one time set up)
(must provide logo/photo/info) | <input type="checkbox"/> MAIL EACH CD TO OFFICE & CLIENT |
| <input type="checkbox"/> STANDARD TEMPLATE (name/company name/phone/address) | <input type="checkbox"/> ADDL.HARD COPIES OF FILE (.45/page) |

BILLING INFORMATION

- | | |
|---|---|
| <input type="checkbox"/> INVOICE TO REQUESTOR | <input type="checkbox"/> PAY BY CREDIT CARD |
| <input type="checkbox"/> INVOICE TO
NAME: _____
ADDRESS: _____
CITY: _____ ST.: _____ ZIP: _____
PHONE: _____ | <input type="checkbox"/> AMEX <input type="checkbox"/> MC <input type="checkbox"/> VISA <input type="checkbox"/> DISCOVER
NAME: _____
CARD NUMBER: _____
3 DIGIT # BACK OF CARD: _____
EXP DATE: _____
(authorization signature form will be faxed or emailed) |

SPECIAL INSTRUCTIONS: _____

By sending this order, I/We herewith authorize Scandoc Imaging, Inc. to act as my/our representative for the purpose of procuring/transferring all file documents in accordance with the directives contained in this order form. The party ordering these file documents to be procured/transferred accepts responsibility for the cost of obtaining and transferring said file documents. In the event a third party is billed, the ordering party/company is held responsible until payment is received. The ordering party will be held liable for all costs associated with the collections of this order.