bettyrecords
MANUFACTURING

Audio Master Log Sheet

to be submitted with every order.

Contact in case of errors? Yes ◯ No ◯

Date: _____ Catalogue/Selection #: _____

Client Name: _____

Artist: _____ Title: _____

Province: _____

Phone (day): _____ Phone (night): _____

Track No.	Index No.	Title	Length
Total Length			

Recording Studio (Where Project Was Recorded)

Engineer's Name: _____ Studio Name: _____

Street Address: _____ City: _____ Province: _____ Postal Code: _____

Phone (day): _____ Phone (night): _____

Fax: _____

Email: _____

Always make a duplicate of your master. (Betty Records is not responsible for lost or damaged masters)