



VOLUNTEERS
 Of Vacaville
 The Blind Project @ CMF

Braille Repair Order Form

Providing Excellence in Volunteer and Affordable Services for the Visually Impaired Since 1960.

Please enclose this form with your braille to be repaired.

Customer # _____ Contact Person: _____ Phone #: _____

Email: _____

Billing Address		Shipping Address: (If different from Billing)	
Name:		Name:	
Attn:		Attn:	
Address:		Address:	
City:		City:	
State:	Zip:	State:	Zip:

Braille Repair Rates:

Braille Repair Service Fee: \$49.99

Parts Fee: 20% over the cost of each part.

Sales Tax will be charged unless a Tax Exemption notification is provided.

Custom Painting Available

At only \$14.99!

All paints are Rust-Oleum

Color Requested:

- | | |
|--|---|
| <input type="checkbox"/> Apple Red | <input type="checkbox"/> Macaw Blue |
| <input type="checkbox"/> Berry Pink | <input type="checkbox"/> Grape |
| <input type="checkbox"/> Rustic Orange | <input type="checkbox"/> Flat Black |
| <input type="checkbox"/> Sun Yellow | <input type="checkbox"/> Hammered Gray |
| <input type="checkbox"/> Hunter Green | <input type="checkbox"/> Semi-Gloss White |

ALL REPAIRS COME WITH A 180 DAY WARRANTY

Is this repair covered under warranty? Yes / No

Braille Serial #: _____

Purchase Order #: _____

Please describe the problem with your braille:

Ship your braille to:

Volunteers of Vacaville

P.O. Box 670

Vacaville, CA 95696-0670

(707) 448-6841, x2044

www.volunteersofvacaville.com