

## **Braille Transcription Order Form**

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

Phone #			Email:	
	Billing Ac	ddress	Shipping	Address: (If different from Billing)
	Name:		Name:	
	Attn:		Attn:	
	Address:		Address:	
	City:		City:	
	State:	Zip:	State:	Zip:
Type of book order (Check One)  □ Transcription  □ Duplication  # of Pages:  □ Date book is needed by:  Grade level of book:  Braille Formatting Information				
Page Width (Number of cells per line):  Page Length (Number of lines per page):  Page Numbering:  Do you want a running head? Yes / No  Do you want the material in UEB or EBAE? (circle one)				
□ A □ E □ G	cknowledgm uthor's Infor scerpts lossary / App		<ul><li>□ Index</li><li>□ Promotion</li></ul>	be brailled from the following list:  onal Material
Embossing format: One Sided / Interpoint (Two Sided) Computer File Copy: Yes / No (If yes File Format: ABT / BFM / BRF / BRL / DXB / TXT / B2K)				

## **Braille Transcription Fees:**

- Literary of Textbook Formatted Braille \$3.00 per Braille page
- Nemeth Formatted Braille \$4.00 per Braille page
- Proofreading \$0.20 per Braille page
- Embossing \$0.20 per Braille page
- Preformatting \$0.50 per Braille page
- Tactile Graphics \$7.00 per Braille page

\*\*Additional copies are embossed at the embossing rate listed above\*\*

Please feel free to contact us for cost estimation. Production time may vary.

www.volunteersofvacaville.com