

## MIRC Equipment Repair/Return Form

(Include this form in box with returning unit)

Date:

Name of Person Returning:

Student Name:

School District:

Phone:

Email:

Product:  Braille Serial #  
 Braille Plus 18 Serial #  
 Book Port Plus Serial #  
 Other, please list

If this product is in need of repair, please provide a description of the problem with this unit

Do you need a replacement product?  Yes  No

(Please also email [Yvonne Ali](mailto:Yvonne.Ali@msb.dese.mo.gov) if you need a replacement.

**Please do not use Styrofoam peanuts to pack Braille.**  
**Please also return adapters, power cords, cables, program disks, or other accessories.**

**Return equipment with this form to:**  
Yvonne Ali, Supervisor  
Missouri Instructional Materials Center  
Missouri School for the Blind  
3815 Magnolia Avenue  
St. Louis, MO 63110

[yvonne.ali@msb.dese.mo.gov](mailto:yvonne.ali@msb.dese.mo.gov)