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: ☐ **Brailler** **Serial #**
☐ **Braille Plus 18** **Serial #**
☐ **Book Port Plus** **Serial #**
☐ **Orion TI-84 Talking Graphing Calculator**
☐ **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 if you need a replacement.

Please do not use Styrofoam peanuts to pack Braillers.
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

Revised: October 2014