

CUSTOMER INFORMATION REPAIR FORM

NAME		DATE		PHONE #	
ADDRESS				FAX #	
CITY	STATE	ZIP	EMAIL		
TITLES BEING SENT-		R	EPAIR INFORI	MATION	
*EXPECTATIONS/NO	ΓES-				
**If you have specific re **If left blank our Book	•		-		
Please send 1/2 down wh	nen shipping y	our materials v	with this form for pro	oduction to begin. If your p	oreference is to have an assessment
first by our Book Engine	ers, send your	items in for re	eview. Allow at least	2-3 weeks, for the assessm	nent period. We will provide a
detailed estimate for you	r review. Prod	duction work v	vill not proceed until	your approval is received	in writing. All orders will have a
\$25.00 per book minimu	m charge, for	evaluation and	return. If you choo	se to have the repair comp	leted, the \$25.00 will apply to the
cost of the repair.					
(CHOOSE ONE)	CF	IECK		CREDIT CARD	
CREDIT CARD INF	ORMATIO	N (FILL ON	ILY IF PAYING	BY CREDIT CARD)	
(CHOOSE ONE) VI	SA MASTE	RCARD DIS	SCOVER AMER	ICAN EXPRESS	
NAME (As shown or	n card)				
NUMBER			CCID (L	ast 3 digits of number	on back)
Expiration Date					