



# CAMERA REPAIRS

## Customer Work Order

**Please complete this work order & enclose with your equipment**

SURNAME: \_\_\_\_\_ GIVEN NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_ Post Code \_\_\_\_\_

PHONE (daytime) \_\_\_\_\_ MOBILE: \_\_\_\_\_ FAX \_\_\_\_\_

E-mail \_\_\_\_\_

(Please tick one box)

- ESTIMATE REQUIRED**     **Service fee enclosed to avoid delay**  
 **WARRANTY REPAIR** (Please enclose Copy of Proof of purchase/ Warranty card)  
 **URGENT Charge repair** no Estimate needed - REQUIRED BY \_\_\_\_\_

### **EQUIPMENT Enclosed:**

**MAKE & MODEL** \_\_\_\_\_

**Serial Number** \_\_\_\_\_ (used for enquiries) **Date Sent** \_\_\_\_\_

### **FAULT FOR REPAIR** (Please detail)

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**The repair of your goods may result in the loss of any user-generated data, please ensure that you have made a copy of any data saved on your goods.**

**-----Tear off bottom portion below for mailing Address label -----**



To:-

**Anderson Camera Repairs**

14 Merritt Street,  
CAPALABA, Brisbane. Q'ld 4157