

This Form is for printing out and filling in by hand.

If you are using Internet Explorer, Firefox, Adobe Reader, or Google Chrome and want a PDF form that you can fill out on your computer click here: [SendingWatchForm2013.pdf](#)

Before you send me any watches, please go to my web site

<http://www.qualitywatchrepair.com> and check to be sure that I am accepting watches at this time.

I work out of my house and do not have a retail shop. This means that you will have to mail your watches to me for repair, yes-even if you live in the Portland area. Thank you for your understanding in this matter.

Please ask first before sending me any watch, as I do not repair all makes of watches may not be able to acquire parts for your watch, or I may not be accepting watches at this time.

It really does help in diagnosing and keeping track of your watch, so both new and returning customers please complete the following form in its entirety, and enclose a completed form with each watch that you wish to have repaired. Please do not send more than two watches without asking first.

When sending me your watch(es), please do not just throw them in a box without padding. If you are using a padded envelope, use two padded envelopes. I also suggest not mailing your watches in presentation boxes, as they cost much more to mail. Please consider the environment when choosing packing materials. Plastic bags, bubble wrap, plastic-lined envelopes, and styrofoam cannot be successfully recycled and will eventually end up in a landfill - forever. Newspaper and other clean, used paper can be recycled and composted. So, in an effort to cut down on waste, all customers who package their watches without the use of plastic materials (newspaper in a cardboard box works very well for most watches) will receive a \$5.00 discount on any repair you authorize.

Include a check, money order, or plastic authorization, made out to Stephen Thomas for \$20.00. The twenty dollars covers diagnosis, and return shipping with up to \$500.00 postal insurance on your watch. If you require more than \$500.00 insurance on return shipping, it will cost you \$2.00 for each \$500.00 of insurance more than the initial \$500.00.

Do you want more than \$500.00 insurance on this watch? ___ Yes ___ No

How much insurance do you want? _____

To prevent watches from just being thrown on my porch, send watches with a signature required to this address: Q. W. R. 3641 S. E. Morrison Street Portland, Oregon 97214

I will ship your watch(es) back to you by Registered Insured US Mail with a signature required. Enter the address you want the watch shipped to:

Your Name:_____ Street:_____

City:_____ State:_____ Zip:_____

It is quite often much more efficient for me to call you. Please include your telephone number

Telephone:_____

Also it takes a good deal of time to answer your e-mailed questions, Please: using block letters, enter your e-mail address, and turn off your spam blocker for my e-mail address so I can e-mail you: jpaulson@earthlink.net

Your e-mail address: _____ Watch Brand and Model _____

Have you noticed condensation in your watch ____ Yes ____ No

Does the date or calendar function work properly ____ Yes ____ No

Chronograph ____ Yes ____ No

Is your watch running slow ____ how slow _____ fast ____ how fast _____

Do you expose your watch to Rain ____ Shower ____ Swimming ____ Diving ____

If diving how deep _____

Description of repair or service required:

I accept Checks, Visa, Master Card, and American Express. I do not take Discover Card.

Please enclose credit card details, or a check made out to Stephen Thomas for \$20.00, to cover diagnostics and return shipping for up to two watches by registered insured mail.

Please carefully enter your credit card number.

Credit card number: _____ Expiration month: _____

Year: _____ CID Code ____ Your Signature: _____

(Credit card details above the \$20.00 diagnostic and shipping fee will only be used upon completion of repair).

Billing address if different from shipping address:

Name: _____ Street: _____

City: _____ State: _____ Zip: _____