



## Certificate of Compliance

**Work Order Number:**

**Client Name:**

Braille Works Int., Inc. hereby certifies that the document(s) is compliant with Section 508 of the Rehabilitation Act of 1973, as amended (29 U.S.C. §794d) and Web Content Accessibility Guidelines (WCAG) 2.1 AA.

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Date

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Braille Works Int., Inc

*Braille Works Int., Inc. 942 Darby Lake Street, Seffner, FL 33584 1-800-258-7544 [www.brailleworks.com](http://www.brailleworks.com)*

Work Order Number: \_\_\_\_\_

Client Name: \_\_\_\_\_

Date: \_\_\_\_\_

## Document List

	Original Document Name	Final Document Name
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