RETURN FOR CREDIT FORM

For faster service, please complete your return for credit request online at www.mywidexPRO.com

Bill-to: _____ Ship-to: _____

BILL TO ACCOUNT INFO	SHIP TO ACCOUNT INFO
Name: _____	Name: _____
Address: _____	Address: _____
Email/Phone: _____	Email/Phone: _____

PATIENT INFORMATION	HCP INFORMATION
Name: _____	Name: _____

PRODUCT INFORMATION				
	Model	Serial Number	Power	Length
Hearing Aid Left				
Hearing Aid Right				
Charger				
Accessory				
Receiver Left				
Receiver Right				

RETURN REASONS								
		Patient Related			Connectivity Related			Administrative
☐ L	☐ R	Benefit insufficient (CR01)	☐ L	☐ R	Cannot Charge (C22)	☐ L	☐ R	Damaged packaging (CR06)
☐ L	☐ R	Financial concern (CR02)	☐ L	☐ R	Cannot Program (C23)	☐ L	☐ R	Wrong product delivered (CR07)
☐ L	☐ R	Cannot tolerate device/amplification (CR03)	☐ L	☐ R	Bluetooth Issue (C23B)			
☐ L	☐ R	Patient preferred other manufacturer (CR04)						
☐ L	☐ R	Patient preferred other Widex instrument/ exchange (CR04B)						
☐ L	☐ R	Illness or death (CR05)						

If the hearing aids have been worn, please indicate whether the returned hearing aids were worn by a prospective user only as part of a bona fide hearing aid selection evaluation in the presence of a hearing care professional. If the hearing aids have been worn outside the scope of a bona fide evaluation, the hearing aids are "used." If the hearing aids are used, do not select the bona fide evaluation box.

☐ L Bona Fide Evaluation	☐ R Bona Fide Evaluation

Signature acknowledges that the returned hearing aids were worn only during a bona fide hearing aid selection evaluation in the presence of a dispenser or hearing aid health professional.

Signature

Please refer to the most current edition of the Widex Price & Policy Guide for more information on the Widex Credit Return Policy. "Used hearing aids" means any hearing aid that has been worn for any period of time by a user. However, a hearing aid shall not be considered "used" merely because it has been worn by a prospective user as part of a bona fide hearing aid evaluation conducted to determine whether to select that particular hearing aid for that prospective user, if such evaluation has been conducted in the presence of the dispenser or a hearing aid health professional selected by the dispenser to assist the buyer in making such a determination. 21 C.F.R. §801.420(a)(6).

Submit to Widex USA, 185 Commerce Drive, Hauppauge, NY, 11788