THIS FORM IS FOR ECOMMERCE PURCHASES ONLY MADE THROUGH <u>WWW.SMITHOPTICS.COM</u>. ANY RETURNS / WARRANTIES MADE THROUGH A RETAIL STORE, WILL NEED TO BE RETURNED TO THE STORE WHERE THE ITEM WAS ORIGINALLY PURCHASED.

## **Model warranty claim form**

(complete and return this form only if you wish to claim your product warranty)

If sent	by email:	smitheu@smithoptics.com	
If sent	by mail:	Smith Returns Department	
		13 F Street, Freeport Center	
		Clearfield, Utah 84016	
Subjec	t: Guarantee claim communic	cation in relation to order n ¹	
With re	egard to the Product(s)	², ordered o	n
		², ordered o	
		4, I hereby give notice that I noted the following defect:	
	e be specific in the description ct showing the defect).	of the problem and, where possible, please attach photographs of t	 :he
For an	y communication related to th	e above, please find below my contact details:	
0	Name and surname:	<b>;</b>	
0		;	
0		;	
0	Email Address:	<del>·</del>	
Date: _			
Signati	ure:		
-			

Please insert order number as indicated in the email containing the Order Confirmation for the Product(s) for which you are noticing a defect.

<sup>&</sup>lt;sup>2</sup> Please insert the Product code as indicated in the invoice for each Product(s) for which you are noticing a defect.

Please insert the date of the order as indicated in the email containing the Order Confirmation for the Product(s) for which you are noticing a defect.

<sup>&</sup>lt;sup>4</sup> Please insert the date of delivery of the Product(s) for which you are noticing a defect.