

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

Model withdrawal form

(complete and return this form only if you wish to withdraw from the contract)

If sent by email:

smitheu@smithoptics.com

If sent by mail:

Smith Returns Department
13 F Street, Freeport Center
Clearfield, Utah 84016
smitheu@smithoptics.com

Subject: Withdrawal communication in relation to order n. _____¹

I hereby give notice that I withdraw from my contract of sale for the following Product(s)

_____ ²

, ordered on _____³, and
(if applicable) received on _____⁴.

As a consequence, I will return the Product(s) indicated above, if received, by sending them at my expenses to the above mentioned address within 14 days from the date of this communication.

I hereby ask to be reimbursed using the same means of payment that I used for the purchase of the Product(s).

For any communication related to the withdrawal please find below my contact details:

- Name and surname: _____;
- Address: _____;
- Phone number: _____;
- Email
Address: _____.

Date: _____

Signature: _____

¹ Please insert order number as indicated in the email containing the Order Confirmation for the Product(s) for which you wish to exercise the right of withdrawal.

² Please insert the Product code as indicated in the invoice for each Product(s) for which you wish to exercise the right of withdrawal.

³ Please insert the date of the order as indicated in the email containing the Order Confirmation for the Product(s) for which you wish to exercise the right of withdrawal

⁴ If the right of withdrawal is exercised following delivery of the Product(s), please insert the date of delivery of the Product(s) for which you wish to exercise the right of withdrawal.