

REXTON Return for Credit Form

PHONE: 800-876-1141
FAX: 763-577-0644
EMAIL: rextton.cc@rextton.com

ACCOUNT & BILLING INFORMATION

Name	Phone	Date
Bill To #	Ship To	

CLIENT & INSTRUMENT INFORMATION

Client's Name:	
Purchase Date:	
Left Serial Number:	Model:
Right Serial Number:	Model:

To help us continuously improve our quality, please select REASON FOR RETURN (CHOOSE ONE)

- 29 ☐ Chose different model
50 ☐ Could not tolerate amplification
33 ☐ Deceased/Illness
49 ☐ Preferred monaural, ordered binaural
91 ☐ Performance not to expectation/intelligibility
32 ☐ Chose instrument from another manufacturer
90 ☐ Defective
10 ☐ Fit/Feedback
67 ☐ Multiple Remakes/Repairs
48 ☐ No improvement over unaided
34 ☐ Financial Reasons

COMMENTS

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☐ Please contact me to discuss this return.

Best time ☐ AM

Name: _____ Phone: _____

to contact: ☐ PM

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 dispenser or hearing aid health 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.

☐ Bona Fide Evaluation

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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.

Audiologist's Signature

Date

¹Used 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 a 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).

FACTORY USE ONLY • Please do not write in this area.
