DO NOT Use this form for Product Quality Issues. Please call Customer Service at 1-800-828-9030

Bausch & Lomb

LENS RETURN FORM

Account Number-	**Date-**
Account Name-	**B&L Sales Rep-**
Address/City/State/Zip-	
Phone Number- ( )-( )-( )	**Email Address-**
Contact Name	

If you are not completely satisfied with your purchase of Bausch & Lomb lenses they may be returned within 90 days of the date of invoice, for exchange or credit.

In order to receive full credit the returned lenses must meet the following requirements

Be accompanied by a valid invoice number
Be free of markings and stickers
Be in the original, unopened, unaltered package

Product NOT eligible for credit or exchange*

Expired; Discontinued; Opened + Altered; Damaged

**Product not eligible for credit or exchange will be destroyed, in accordance with Bausch & Lomb policy*
+ Opened vials of Optima Toric, Silsoft& Optima Spare Pair lenses may be returned for credit and/or exchange
Product purchased through an Authorized Distributor must be returned to the original place of purchase

RETURN REASON CODES (use to fill in below)

BL1-Damaged Upon Receipt **BL2**-Duplicate Order **BL3**-Wrong Product/Power Ordered **BL4**-Shipped in Error	**BL5**-Patient Prescription Change **BL7**-Patient Cancellation

LENS TYPE ***(BC, +/- Sphere, Cyl, Axis or Add)***	**QTY**	**INVOICE #'s**	(Required) **RTN CODE**

*If your return is for 15 boxes or more, a return authorization number must be obtained by calling 1-800-828-9030 Option 6; or via email at crcreturns@bausch.com.

Authorization # for 15 or more boxes: _____

Return Product to:

Bausch & Lomb, Inc.
Customer Resource Center
1400 N. Goodman St.
Rochester, NY14609

or

Bausch & Lomb, Inc
PO Box 30474
Rochester, NY 14603

This form is available at www.bausch.com/policies
Or call the Customer Resource Center at 800-828-9030 to receive a fax copy.

Credit will NOT be given for any return not meeting the Bausch & Lomb Returns Policy and product will be destroyed.