

NORTH AMERICA BIOPHOTONIC SCANNER LEASE TERMINATION REQUEST

Please accept this notice as my written letter of Scanner lease termination.

I do not wish to continue leasing the Pharmanex BioPhotonic Scanner equipment at this time. I understand if any lease payments that may be in default are still my obligation to satisfy. I understand that my down payment (S2) or my initial payment (S3) is non-refundable.



S2 Termination Please Note: If more than 34 months have been completed, your down payment has already been used and applied to months 34, 35 and 36. S2 Down payments are never refundable.

Initial _____ *(I am returning S2)*



S3 Termination Please Note: Lessee shall retain ownership of the iPad Mini which was purchased upon shipment of the S3 and collection of the non- refundable Initial Payment; any voluntary/accidental return of the iPad Mini cannot be traced and will not result in refund of the Initial Payment. S3 Initial payments are never refundable.

Initial _____ *(I am returning S3)*

The final month of Scanner equipment possession is prorated at daily rate of \$6.63 (USD) per day.

Because all Scanner payments are made in arrears, please expect for your final prorated month of billing to be collected at the time this termination letter is received by the company, for the current month billing.

Please refer to your leasing documents for detailed terms and conditions.

LESSEE:

NAME (print or type):	SIGNATURE:
TELEPHONE NO.:	DISTRIBUTOR ID US or CA#
DATE :	SCANNER EQUIPMENT CS#

REASON FOR LEASE TERMINATION:

- 01 Lease expired, not renewing
- 02 Unable to use equipment productively or leaving the business
- 03 Lease rental fees too expensive or financial reasons
- 04 Loss of confidence in Scanner program
- 05 Other

FOR SCANNER OPERATIONS USE ONLY

We will email you a UPS prepaid label. It is your responsibility to print the label and take the scanner to a UPS hub or UPS store.

You must print the label and ship the scanner back to Nu Skin Enterprises within 14 days of receipt of the prepaid label or you will be responsible for additional monthly rental fees as well as fees to reissue a new UPS prepaid label.

Your email address where we should send the label:

Required: Your return address for label:

I would like to personally drop off my scanner equipment CS # Product _____ to the Provo Nu Skin Experience Center located on the Nu Skin Plaza of west Center Street in Provo, Utah.

PLEASE FAX TO: 1-800-487-8000

Pharmanex® BioPhotonic Scanner Return Instructions

Dear Distributor,

The following steps are designed to help you complete the return process for the Pharmanex® BioPhotonic Scanner. Please read through all of these instructions before you begin preparing the scanner for return.

1. **Checklist:** Please use the parts checklist sheet to ensure the returning package contains all the appropriate parts and documentation. Please note that you will be charged for any missing parts. Please keep a copy of your checklist for your own records as well as sending a copy back with your scanner shipment.
2. **S2 Return:** Once you have assembled all the parts to be returned and have placed them in their respective carrying cases, please package up the carrying cases in the same shipping container (white corrugated plastic box with foam padding inserts) that the scanner originally came in. If for some reason you do not have the original shipping container and packaging materials the scanner came in, please contact Shipping and Returns at 1.800.487.1000. Please note you will be charged \$28.00 for the cost of a new box and packaging material to be sent to you.
3. **S3 Return:** Package the S3 and S3 power cord and caps only. The S3 should be packaged inside the original white and green carton in which the S3 arrived in. The S3 Scanner & power cord set are the only returning items. The iPad Mini is yours to keep, you purchased this with your initial payment of the S3.
4. Based on the information and address you provide in the termination template above, we will create and email a prepaid label for you. Please watch your email inbox. If five (5) business days have elapsed since you faxed your notification of termination and you have not received your emailed label, please contact the Shipping and Returns department at 1.800.487.1000.
5. Please DO NOT return any additional product or marketing materials with your scanner. YOU WILL NOT RECEIVE PROPER REFUND OR CREDIT for items sent with your scanner. You must arrange a separate product Return Authorization for any standard product returns.

Thank you for your attention. If you need further assistance, please contact us at 1.800.487.1000

Pharmanex® BioPhotonic Scanner Returning Parts Checklist

S2 Everest BioPhotonic Scanner returns should include:

PARTS	QTY
Scan Unit	
Scanner	1
Scanner Power Cord (black)	1
Laptop Unit	
Dell Laptop	1
Power Converter & Power Cord	1
Handheld Barcode Reader (usb).	1
Additional Cords	
Data Serial Cable (RS-232c to connect the Scanner to the laptop)	1
Carrying Cases	
Scanner Carrying Case	1

S3 BioPhotonic Scanner returns should include:

PARTS	QTY
S3 Scan Unit	
Scanner with Dark Caps	1
Scanner Power Cord Set	1
Scanner green/white S3 Carton Box	1

***Please check each component off of this checklist as you prepare it for shipment.
You will be held financially responsible for any components not returned.***