



"WOW" Komfort® - All Day, Every Day!

Wear Guarantee Form

Print this form and send it along with your defective pair of molded polyurethane KLOGS® and a copy of your original sales receipts with date of purchase circled.

Send your package to us using the shipper of your choice. Insure your package for the full value of the merchandise. **Keep your shipping receipt until you have received your replacement pair of KLOGS®.** Allow 4-6 weeks for delivery.

Ordered by (please print clearly)

Ship To (if different than ordered by)

Name _____

Name _____

Address _____

Address _____

City _____

City _____

State _____ Zip Code _____

State _____ Zip Code _____

Daytime Phone Number _____

Evening Phone Number _____

E-Mail address _____

Shoe Style Name _____ Color _____ Size _____ Width _____

Shipping & Handling (per order): **\$ 7.00**

Form of Payment (check one): Check Enclosed _____ Charge Credit Card _____

Card Type: _____ Visa _____ MasterCard _____ AMEX

Card # _____ Exp Date _____ CSV # _____

Name on Credit Card: _____

Billing address of Credit Card: _____

Shipping Label

>From

KLOGS - USA / Consumer Returns
1000 Independence Dr., Ste. 1
Sullivan, MO 63080