RETURN/EXCHANGE INSTRUCTIONS

FREE STANDARD SHIPPING, RETURNS & EXCHANGES (On all US orders excl. AK, HI PR)

60-DAY WEAR TEST OF SHOES & INSOLES
Test our products Risk Free for up to 60 days, and if you are not completely satisfied, return them for a full refund. OrthoFeet will accept your item(s) within 60 days from date of purchase.

1. To check if the shoes fit, we would appreciate it if you could try them on a carpeted surface indoors to avoid wearing marks.
2. Shoe box should be unmarked and in new condition; otherwise we may apply a re-boxing fee of $2.50.
3. Please be sure to keep a copy of your return tracking number for future reference.

SOCKS
If you are returning socks, partial refund will be issued only to unused pairs that are still attached to the original packaging.

TO PROCESS YOUR EXCHANGE or RETURN:
1. Enclose a copy of the packing slip or invoice with the returned item(s).
2. For an exchange: Fill out your exchange information below, and place form with the returned item.
3. To print out your prepaid shipping label: a. visit www.orthofeet.com and click on “Returns & Exchanges”, located at the bottom of the website; b. click on the link “Click Here” to generate a free label; c. you’ll be redirected to a form, where you can enter your personal information; d. please enter your order number into the Order # fields. (Instructions are also available on the website).
4. Once you fill out the form, click on “Generate Print Label”, print out the prepaid label and affix to the outside of your shipping carton.
5. Follow website instructions regarding where to drop off the package. Please keep a copy of the tracking # for your reference.
6. Please fill out reason for the return (below), and place form inside the shoe box of the returned item.
   Please allow us 15-21 business days to receive and process your Return. You will receive email confirmation of your Exchange or Refund once your Return is processed.

Please check for either an Exchange or a Return: 1. EXCHANGE  2. RETURN

REASON FOR RETURN/EXCHANGE: Please check a reason, and provide details below:

<table>
<thead>
<tr>
<th>Ordered Extra Pair</th>
<th>Quality Issue</th>
<th>Don't Like</th>
<th>Ordered Wrong Item</th>
</tr>
</thead>
<tbody>
<tr>
<td>Too Short</td>
<td>Too Wide</td>
<td>Too Long</td>
<td>Too Loose</td>
</tr>
<tr>
<td>Heel Slippage</td>
<td>Too Narrow / Too Tight</td>
<td>Other: Comment below</td>
<td></td>
</tr>
</tbody>
</table>

COMMENTS:

EXCHANGE REQUEST:

New Item Style: __________________________ Color: _______ Size: _______ Width: __________

Please Send Returns/Exchanges To: ORTHOFEET, INC. 152 Veterans Drive, Northvale, NJ 07647