

# 2014-15 SIDESWIPE WARRANTY REPLACEMENT FORM

Name: \_\_\_\_\_ Amazon Order # \_\_\_\_\_

Other Order # or gift giver name \_\_\_\_\_ Order Date: \_\_\_\_\_ (1 year or less)

Shipping Address: \_\_\_\_\_

Email address: \_\_\_\_\_ Phone number: \_\_\_\_\_

## PLEASE FILL OUT THE FOLLOWING USAGE INFORMATION

Our technical staff uses this information to improve our products and manufacturing procedures

SideSwipe Size/ Model being Returned: \_\_\_\_\_ Mixer Model Number: \_\_\_\_\_

Age of Mixer: \_\_\_\_\_ How frequently do you use SideSwipe? \_\_\_\_\_ times per month

Your typical types of mixing: \_\_\_\_\_

Did you adjust the height of your beater? Why? \_\_\_\_\_

Damage experienced: \_\_\_\_\_

How did the damage occur? \_\_\_\_\_

### ACTION REQUESTED:

Please send me:

SideSwipe Model KTH-2 Choose: Red / Blue fins

SideSwipe Model KLN-1 Choose: Red / Blue fins

SideSwipe Model KLW-1 Choose: Red / Blue fins

### RETURN PROCEDURE:

Ship SideSwipe in a PADDED ENVELOPE to:

**SIDESWIPE WARRANTY RETURNS**  
c/o Frut LLC/SideSwipe Store  
PO BOX 2158  
WESTERVILLE, OH 43086

Please allow 3-4 weeks for processing.