

EXHIBIT 1

Skechers Class Action Settlement

Claim Form

Use this claim form only if you bought eligible Skechers shoes between August 1, 2008 and [DATE 2012].
The eligible Skechers shoes are listed below.

**All claim forms must be electronically submitted no later than [DATE] or
postmarked no later than [DATE] to:**

Skechers Toning Shoes
P.O. Box 2008
Chanhassen, MN 55317-2008

CLAIM INFORMATION	
CLASS MEMBER INFORMATION	

Name:

Mailing Address:

Number and Street

City: State: Zip Code:

Daytime Telephone Number: () - E-mail Address:

Evening Telephone Number ()

<i>PURCHASE INFORMATION – SKECHERS SHOES</i>	
<i>Eligible Skechers Shoe Types</i>	<i>Number of Pairs Purchased</i>
Shape-ups	
Podded Sole Shoes	
Tone-ups (Non-Podded Sole)	
Resistance Runner	

Payment amounts to eligible Class Members will vary depending upon, among other factors, the product(s) purchased, the number and amounts claimed by all Class Members and other adjustments and deductions as specified in the Settlement Agreement. The amount could be more (up to double), the same, or less than \$40.00 for Shape-ups, \$42.00 for Resistance Runner, \$27.00 for Podded-Sole Shoes, and \$20.00 for Tone-ups (Non-Podded Sole).

Please note: If you submit a claim where the amount sought exceeds \$200, the Class Action Settlement Administrator may request proof of purchase to validate your claim. If the total amount of all claims submitted by all class members exceeds the total available relief, subject to any and all applicable deductions, the Class Action Settlement Administrator may request proof of purchase to validate your claim. If requested, you must provide proof of purchase or your claim will be reduced or denied and you may not appeal the reduction or denial. Any information you provide in connection with this claim form may be submitted to a federal or state agency in the administration of this settlement.

AFFIRMATION

I declare or affirm, under penalty of perjury, that the information in this claim form is true and correct to the best of my knowledge and that I purchased the applicable product(s) claimed above between August 1, 2008 to [DATE 2012]. I understand that the decision of the Class Action Settlement Administrator is final and binding. I understand that my claim form may be subject to audit, verification and Court review.

Signature: _____ Date: _____

Claim Forms must be electronically submitted no later than [DATE] or postmarked no later than [DATE], 2012.

Questions? Visit www.Skecherssettlement.com or call, toll-free, (866)-325-4186.