

McKesson Patient Care Solutions

Holiday Card Design Contest

Enter the McKesson Patient Care Solutions Inc. (MPCS)
Holiday Card Design Contest!

It's easy as 1-2-3 to enter:

1. Review the contest rules, instructions for entering and the 10/23/15 deadline.
2. Print the MPCS Holiday Card Design Contest Template or save it to the design program on your computer. Design an award-winning creation!
3. Submit your design and signed permission form to MPCS! Send them to marketing@mckesson.com or McKesson Patient Care Solutions Inc., Marketing Department, 540 Lindbergh Drive, Moon Township, PA 15108.

Here is everything you will need. We can't wait to see your creations! Have fun, and good luck.

Sincerely,

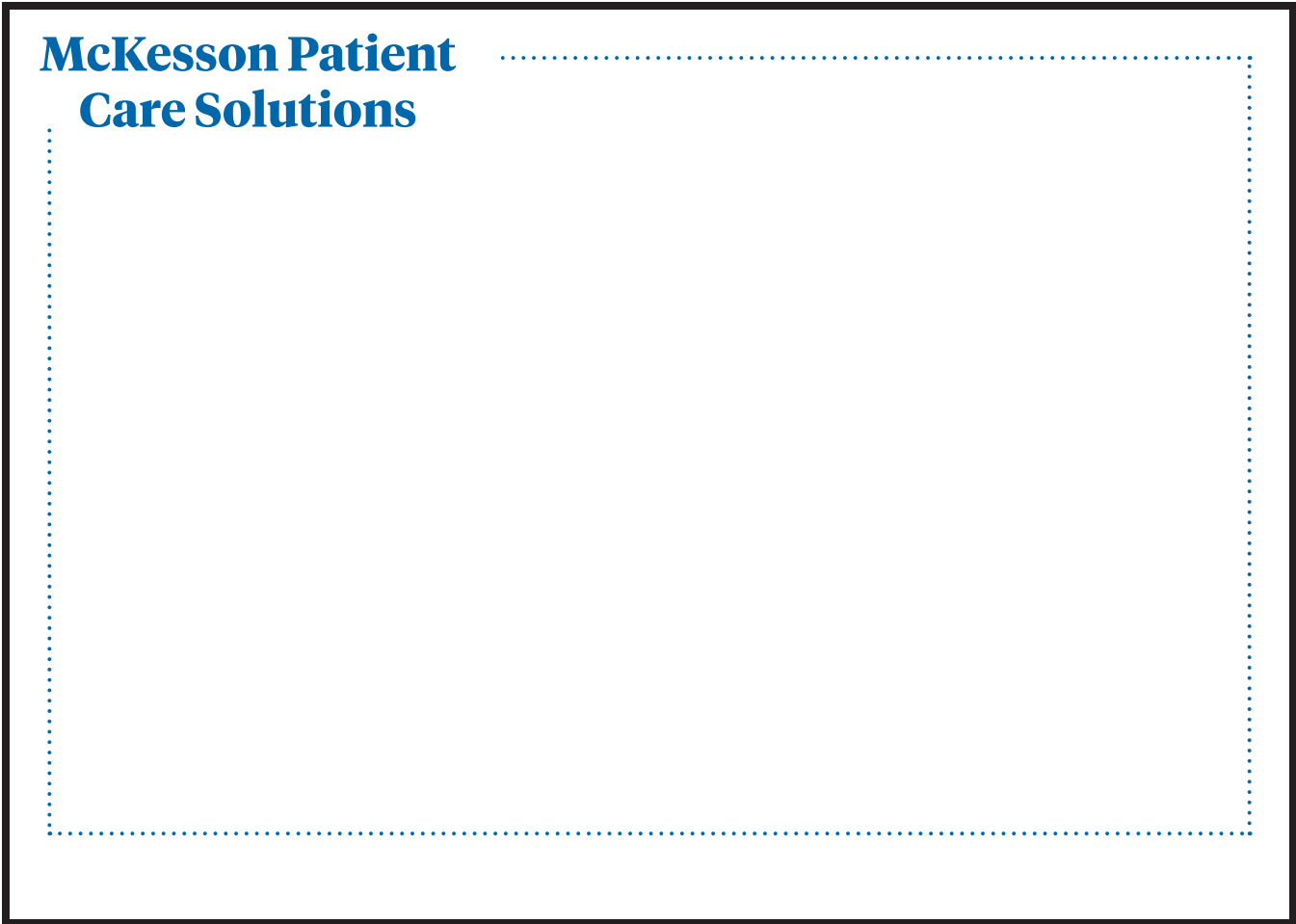
McKesson Patient Care Solutions Inc. (MPCS)

Contest Rules and Instructions

1. MPCS Holiday Card Design Contest is open to residents of the United States and the District of Columbia ages 18 and younger. One entry per person.
2. Contestants are not required to be McKesson Patient Care Solutions Inc. (MPCS) customers. No purchase necessary.
3. The contest runs until 10/23/15.
4. Deadline for entries is 11:59 p.m. Eastern Time on October 23, 2015. Emailed entries must be time-stamped by 11:59 p.m. on October 23, 2015. Mailed entries must be postmarked October 23, 2015 and received by MPCS no later than October 30, 2015.
5. Entries may contain the name McKesson Patient Care Solutions.
6. Entries cannot display an identifiable commercial/corporate advertising other than MPCS.
7. Entries can be emailed to marketing@mckesson.com or mailed to McKesson Patient Care Solutions Inc., 540 Lindbergh Drive, Moon Township, PA 15108. Entries cannot be faxed.
8. Entries must be accompanied by the permission form signed by the contestant, or if under 18, a legal guardian.
9. By entering, contestants certify that their artwork and their name can be used by MPCS for marketing purposes, including promoting this contest.
10. Entries cannot contain, incorporate or reference anything that is owned by any third party or entity or would require the consent of any third party or entity in any jurisdiction.
11. Entries must be the contestant's original work that has not won a previous prize or award. Modifying, enhancing or altering a third party's pre-existing work does not qualify as a contestant's original creation.
12. Entries cannot contain any information that references other websites, addresses, email addresses, contact information or phone numbers.
13. Entries must not contain defamatory statements (including words or symbols that are widely considered offensive to individuals of a certain race, ethnicity, religion, sexual orientation, gender and/or gender identity or socioeconomic group).
14. Finalists will be chosen by the MPCS Marketing Department. MPCS employees will vote to select winner. Winner will be notified by MPCS on or about 11/9/15.

NOTE: MPCS reserves the right to alter the winner's artwork to conform to color accuracy and printing requirements.

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Permission To Publish Holiday Card Artwork

I hereby consent to the use of my image, pictures, artwork and information about me, such as my first name and age, by McKesson Patient Care Solutions Inc. (MPCS) in marketing materials, which may be used, disclosed, distributed and/or displayed to a variety of audiences, including the general public.

I authorize MPCS, its assigns and transferees to publish this information in print and/or electronically.

I have the right to revoke this authorization at any time except to the extent that MPCS has already acted based on my authorization by notifying the Marketing Department at MPCS, 540 Lindbergh Drive, Moon Township, PA 15108 or via marketing@mckesson.com. I understand that information used or disclosed as part of this authorization may no longer be protected by law.

I have the right to review the material that is going to be published as well as refuse to sign this authorization.

MPCS will not condition my treatment on whether I provide authorization for the requested use or disclosure.

Signature

Printed name

Legal guardian name (if under 18)

Legal guardian signature

Street Address

City State Zip

E-mail

Date