

REWARDS CENTRAL MAIL IN SUBMISSION FORM

COMPILE the following documents to complete your submission.

- This submission form (completed)
- Copy of your receipt showing Eye Care Professional's name, ACUVUE® Brand purchased, quantity purchased, purchase date and purchase price. Please ensure all information is legible.

MAIL all documents to:

HelloWorld, Inc.
PO Box 5085
Kalamazoo MI 49003-5085

By submitting my information, I agree that Johnson & Johnson Vision Care, Inc., may use it to evaluate my Rewards Submission and to contact me about this program, and that it will be governed by the Johnson & Johnson Vision Care, Inc., [Privacy Policy](#). I have read the [Full Terms and Conditions](#). Reward requests must be received within 30 days of purchase.

CONTACT INFORMATION

All fields required. Please print clearly.

FIRST NAME LAST NAME

EMAIL ADDRESS

MOBILE PHONE

ADDRESS (NO P.O. BOXES, PLEASE.)

CITY STATE ZIP CODE

BIRTH DATE (MM/DD/YYYY)

PURCHASE DETAILS

REWARDS CODE
(From the Promotional Page provided by your Eye Care Professional)

EYE CARE PROFESSIONAL (First and Last Name)

NAME ON PRESCRIPTION

SELECT YOUR ACUVUE® BRAND

Please write the number of contact lenses purchased in the column for each eye.

ACUVUE® Brand purchased	LEFT EYE	RIGHT EYE
Example	12	12
ACUVUE OASYS® Brand 1-Day with HydraLuxe™ Technology		
1-DAY ACUVUE® MOIST Brand Contact Lenses		
1-DAY ACUVUE® MOIST Brand for ASTIGMATISM		
1-DAY ACUVUE® MOIST Brand MULTIFOCAL Contact Lenses		
1-DAY ACUVUE® DEFINE® Brand Contact Lenses		
1-DAY ACUVUE® TruEye® Brand Contact Lenses		
ACUVUE OASYS® Brand 1-Week for Overnight Use*		
ACUVUE OASYS® Brand Contact Lenses 2-Week		
ACUVUE OASYS® Brand 2-Week for ASTIGMATISM		
ACUVUE OASYS® Brand 2-Week for PRESBYOPIA		

*Available as annual supply only

Available Rewards

**ACUVUE OASYS® Brand
1-Day with HydraLuxe™ Technology**

**1-DAY ACUVUE® MOIST Brand
Contact Lenses**

**1-DAY ACUVUE® MOIST Brand
for ASTIGMATISM**

**1-DAY ACUVUE® MOIST Brand
MULTIFOCAL Contact Lenses**

**1-DAY ACUVUE® DEFINE® Brand
Contact Lenses**

**1-DAY ACUVUE® TruEye® Brand
Contact Lenses**

**ACUVUE OASYS® Brand
1-Week for Overnight Use***

(*Available as Annual Supply Only)

\$80

ANNUAL SUPPLY

\$35

6 MONTH SUPPLY

\$10

3 MONTH SUPPLY

**ACUVUE OASYS® Brand
Contact Lenses 2-Week**

**ACUVUE OASYS® Brand
2-Week for ASTIGMATISM**

**ACUVUE OASYS® Brand
2-Week for PRESBYOPIA**

\$35

ANNUAL SUPPLY

\$10

6 MONTH SUPPLY

ACUVUE®
OASYS
BRAND CONTACT LENSES

1-DAY ACUVUE®
MOIST
BRAND CONTACT LENSES

1-DAY ACUVUE®
TruEye®
BRAND CONTACT LENSES

define 1-DAY ACUVUE®
BRAND CONTACT LENSES

TERMS & CONDITIONS. Purchases of ACUVUE OASYS® Family, 1-DAY ACUVUE® MOIST Family, 1-DAY ACUVUE® TruEye® and 1-DAY ACUVUE® DEFINE® must be made in-office or in-store between March 1, 2016 and June 30, 2016. ** Reward requests must be received within 30 days of purchase***. Product purchase must be made within 90 days after contact lens fit/exam. Limit one reward per customer, per offer, per yearly eye exam visit. This offer is not valid in combination with any other product offer including Money Back Guarantee. Offer valid for U.S. residents only. Offer not valid where prohibited by law. Allow 14 days for delivery. No P.O. boxes, only street or rural addresses are acceptable. Fraudulent submissions could result in federal prosecution under the U.S. Mail Fraud Statutes (18 U.S. Code Section 1341 and 1342). Not responsible for lost, late or undelivered responses.

ACUVUE® Rewards are only valid on in-office purchases and purchases made at participating retail locations. Rewards are not valid for internet purchases or purchases made at Costco® Optical, Sam's Club® Optical, BJ's® Optical, Walmart® Optical or Target® Optical, but other offers may be available for ACUVUE® Brand purchases at these retailers.

NOTICE TO CONSUMERS: If you are personally filing a claim for reimbursement from a third-party payer (e.g., insurance company, employer group, etc.) for the purchase of this product, your claim must be based upon your payment less the amount of this reward. If your doctor is filing the claim, you must notify the doctor's office of the need to deduct this rebate amount from the purchase price used in calculating the claim.

ACUVUE®, ACUVUE OASYS®, 1-DAY ACUVUE® MOIST, 1-DAY ACUVUE® TruEye®, 1-DAY ACUVUE® DEFINE® are trademarks of Johnson & Johnson Vision Care, Inc.

**Rewards are in the form of a Visa® prepaid card. Card is issued by The Bancorp Bank, Member FDIC, pursuant to a license from Visa U.S.A. Inc.

***Johnson & Johnson Vision Care, Inc., reserves the right to cancel this rewards program at any time without notice.

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