

Tears Again® HYDRATE™



\$25.00 REBATE OFFER

To receive your prescription rebate for Tears Again® HYDRATE™ here's what you need to do:

- 1) Fill out the information below.
- 2) Mail this rebate coupon, along with your original pharmacy prescription receipt to:

OCuSOFT Rebate
P.O. Box 42886
Cincinnati, OH 45242-0886
800-593-7062

Name _____

Address _____

City/State/Zip _____

Email (optional) _____

Physician's Name _____

By signing this Coupon, I certify that I meet and agree to comply with the terms and conditions listed below.

Signature _____

Date _____

Terms and Conditions:

Tears Again® HYDRATE™ is a trademark of OCuSOFT, Inc. This rebate offer is not valid for prescriptions under Medicaid, Medicare Part D, or Medicare endorsed drug discount cards, federal or state programs (including any state prescription drug programs) or other private indemnity or HMO insurance plans which reimburse you for the entire cost of your prescription drugs. Individuals whose insurance plans cover all of the charge for Tears Again® HYDRATE™ with no co-payment are not eligible for a rebate. This rebate is not valid for residents of Massachusetts whose insurance plans cover a portion (co-payment) of the charge for Tears Again® HYDRATE™ or where otherwise prohibited by law. You must deduct the value of this rebate from reimbursement request submitted to an insurance plan, either directly by you or on your behalf. The amount of this rebate will be \$25.00 or the amount of any insurance co-payment, whichever is less. You must submit your original pharmacy receipt with this rebate offer. Rebate offer expires **March 31, 2011**. Rebate is only available for product purchased in the United States. OCuSOFT® reserves the right to rescind, revoke or amend this offer without notice. You understand and agree to comply with the terms and conditions of this offer set forth above. Please allow six to eight weeks upon receipt for processing.