

DAILIES® CHOICE PROGRAM

VISIT DAILIESCHOICE.COM

SAVE UP TO **\$200***

DAILIES TOTAL1® FAMILY

SAVE UP TO **\$150***

DAILIES® AQUACOMFORT PLUS® FAMILY

ON AN ANNUAL SUPPLY VIA MAIL-IN (OR ONLINE) REBATE



For **NEW WEARERS** to DAILIES TOTAL1®
or DAILIES® AquaComfort Plus®
contact lenses

***Savings via mail-in (or online) rebate.** Rebate is in the form of an Alcon VISA® pre-paid card. Valid on purchases made between 5/1/18 and 8/31/18. Rebate claim must be submitted within sixty (60) days of your purchase. Additional restrictions apply. See full Terms and Conditions on the reverse side.

Alcon A Novartis
Division

HOW TO RECEIVE YOUR DAILIES® CHOICE REBATE:

1. Get an eye exam and/or contact lens fitting from your eye care professional.
2. Purchase an annual supply of DAILIES TOTAL1® or DAILIES® AQUACOMFORT PLUS® contact lenses during the Promotion Period (May 1, 2018 – August 31, 2018) from your eye care professional.
3. Visit DAILIESCHOICE.COM and register for your unique Rebate Code.
4. Go to www.alconchoice.com and enter your Rebate Code.
5. Complete the rebate submission process on www.alconchoice.com within sixty (60) days of your purchase. To complete the process, you will need to enter your Rebate Code and electronically upload the following required documents:
 - a. A copy of the original sales receipt with the eligible contact lenses circled
 - b. A copy of one original UPC code from one box of eligible contact lenses
 - c. A copy of your eye exam receipt and/or lens fitting receipt
6. If you prefer to mail-in your rebate submission, you may download an Official Rebate Form from www.alconchoice.com. Mail-in submissions must be postmarked within sixty (60) days of your purchase.
7. If you would like assistance with your rebate, please call 1-855-344-6871.

PROMOTIONAL PERIOD: MAY 1, 2018 THROUGH AUGUST 31, 2018

PURCHASE MUST OCCUR DURING THE PROMOTIONAL PERIOD AND REBATE SUBMISSION MUST BE MADE WITHIN SIXTY (60) DAYS OF PURCHASE.

FOR PURCHASES THROUGH EYE CARE PROFESSIONALS, patients are eligible for a \$200 rebate on an annual supply of DAILIES TOTAL1® contact lenses or a \$150 rebate on an annual supply of DAILIES® AquaComfort Plus® contact lenses. Offer not valid for purchases made through eye care professionals in practices associated with large retailers who offer instant savings promotions or other rebate promotions for Alcon contact lenses, including, but not limited to, Costco® Optical, Walmart® Vision Centers, or Target® Optical.

REBATE TERMS AND CONDITIONS: **1.** Purchase an annual supply (equivalent of eight 90-ct boxes) of DAILIES TOTAL1® or DAILIES® AquaComfort Plus® contact lenses between May 1, 2018 and August 31, 2018. Purchases made before or after these dates will not be eligible for this rebate. (Purchases made prior to May 1, 2018 may qualify for a prior Alcon rebate, subject to terms and conditions of that offer.) Purchase date is determined by the date on your sales receipt. **2.** Must be a new wearer to DAILIES TOTAL1® or DAILIES® AquaComfort Plus® contact lenses. For purposes of this offer, a "new wearer" is a lens wearer who is new to the DAILIES® brand of contact lenses or an existing DAILIES® brand lens wearer that switches contact lenses within the DAILIES® brand family. **3.** Eye exam or lens fitting is required and must occur within 90 days prior to lens purchase. **4.** Rebate submissions must be made (and postmarked, if by mail) within sixty (60) days of lens purchase. All rebate submissions must be made by the patient or purchaser. Rebate submissions by an eye care professional or staff member on behalf of a patient or purchaser are not eligible. **5.** All rebate submissions require a valid rebate code (obtained from www.DAILIESCHOICE.com) and the following documentation: (A) a valid sales receipt that includes: (i) patient or purchaser name; (ii) contact lens product purchased; (iii) purchase location; (iv) number of boxes purchased; and (v) date of purchase; (B) an eye exam/lens fitting receipt with name of patient and date of exam/fitting; (C) a UPC/barcode label from one purchased product box; and (D) if submitting by mail, a completed Alcon Rebate Redemption Form. Alcon is not responsible for lost, late, illegible, postage-due or misdirected mail. We suggest that you make a copy of all rebate materials for your records. All material submitted becomes property of Alcon and will not be returned. Online rebate submissions must contain legible images of required documentation. **6.** All rebate submissions are subject to purchase validation. Alcon reserves the right to request additional information in connection with each rebate submission. **7.** Limit of one (1) Alcon rebate per person, per 12-month period. **8.** Limit of five (5) rebates per household and/or e-mail address per 12-month period, except where prohibited by law. **9.** Not valid on purchases made on a subscription basis (i.e., when payment is made in installments) and cannot be combined with any other promotional offer, including any other rebate or instant savings promotion. **10.** Valid only in the fifty (50) United States, District of Columbia ("U.S.") and U.S. Territories (Puerto Rico, Guam and U.S. Virgin Islands). Void where prohibited by law. **11. If these terms and conditions are not met, a rebate will not be issued.** **12.** Allow approximately eight (8) weeks for delivery of your rebate following receipt and verification of all required rebate documentation. Rebates are payable in U.S. dollars in the form of a Visa® Prepaid Card.* No P.O. boxes (except in ND and where required by law). **13.** State and federal laws prohibit acts devised to defraud or to obtain money or property by false or fraudulent means, including, among other things, the use of fictitious names or addresses. **14.** Alcon reserves the right to cancel, modify or change this rebate program and institute fraud prevention measures at any time without notice. **15.** You may call the support line at 1-855-344-6871 for assistance. Please note that rebate claims cannot be submitted by phone.

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

* Rebate is in the form of a Visa® prepaid card issued by The Bancorp Bank, Member FDIC, pursuant to a license from Visa U.S.A., Inc. The prepaid card can be used at any merchant that accepts Visa® debit cards. The prepaid card is not redeemable for cash or usable at any ATM. Pay close attention to the expiration date of the prepaid card, which is valid through the last day of the month printed on the front of the prepaid card. You will not have access to any unused funds after expiration, subject to applicable law, and lost or expired cards will not be replaced. For complete terms, conditions and fees, see the Cardholder Agreement, which may include the imposition of certain fees.