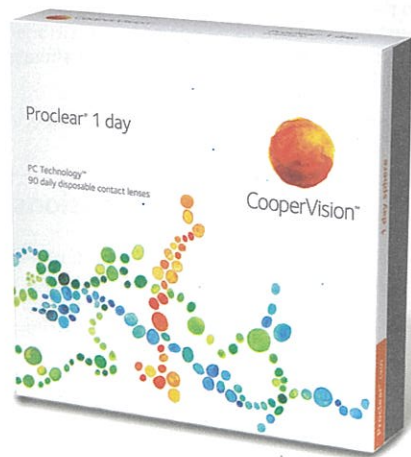
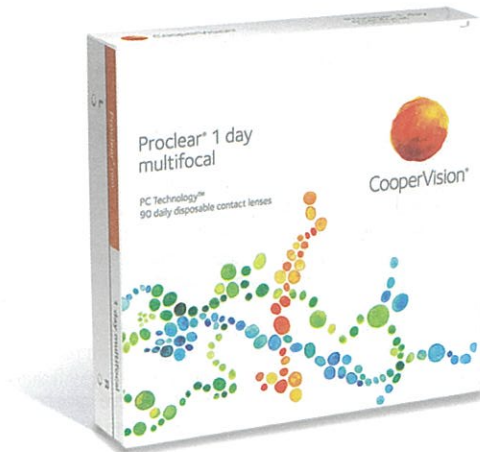


EARN
\$90

on your Proclear® 1 day
contact lenses

EXCLUSIVE OFFER

PURCHASE DATES: 7/01/22 - 12/31/22



Proclear® 1 day brand:
\$90 off (8) 90-packs



Submit or track your rebate at
[CooperVisionPromotions.com](https://www.coopervisions.com/promotions)

🔒 Look for the padlock in your browser.



Donate all or part of your rebate to
Optometry Giving Sight to transform
lives through the gift of vision



22-12359

Rebate Dates: 07/01/2022 – 12/31/2022

Submit Date: Within 60 days of lens purchase

Offer Code:



Qualify for a Rebate

Read the full rebate terms and conditions below.

Visit your eye care practitioner for a contact lens fitting.

Qualify for the required number of products listed on the front in a single transaction. All purchases must be from the same eye care practitioner who has prescribed your contacts, or from an affiliated location with that practitioner.

Rebate will be paid in the form of a convenient CooperVision® Visa Prepaid Card.*

Required Documents

(must be clear and legible)

Upload the following itemized receipts:

- Dated eye exam receipt with fitting fee and date circled.
- Dated sales receipt with eligible lens purchase(s) and date circled.
- Two product box end panels (one for each eye) showing prescription information.

End Panel

Example:

COOPERVISION PRODUCT		
SC	DIA	PWR
8.7	14.4	-3.00

To Submit a Rebate

(must be within 60 days of purchase)

- 1 Complete the online claim form at [CooperVisionPromotions.com](https://www.CooperVisionPromotions.com). You will be required to upload images of the required documents via either mobile device or computer and have a valid and accessible email address.
- 2 You will receive a confirmation email from CooperVisionPromos@360incentives.com with your claim number that you can use to track anytime.
- 3 Once your claim has been reviewed and approved, you will receive an email from notification@coopervisiondigitalrewards.com with the details on how to redeem your physical or virtual CooperVision Visa Prepaid Card.

Questions? Visit us at [CooperVisionPromotions.com](https://www.CooperVisionPromotions.com) and click Help Center

REBATE TERMS & CONDITIONS: To receive your rebate, you must satisfy each of the rebate requirements and provide the following documentation: (A) an eye exam/lens fitting receipt with your name; (B) a valid sales receipt for a qualifying contact lens purchase that includes: (i) patient name; (ii) purchase location; (iii) CooperVision contact lens product purchased; (iv) number of lenses purchased; and (v) date of purchase; and (C) a product box end panel (one for each eye). Failure to follow each of these steps is a rejection of this rebate offer. Offer valid only for residents of the U.S., Puerto Rico and U.S. Virgin Islands. Offer valid only when contact lenses are purchased from prescribing eye care professional or affiliated location. Offer not valid where prohibited by law. Offer not valid with any other offer or rebates. Rebate not valid in combination with purchase at 1-800 CONTACTS, Costco or Internet Retailers. Allow up to 8 weeks to receive the payment email and instructions for redeeming a physical or virtual prepaid card. CooperVision reserves the right to cancel, suspend, or modify part of or this entire rebate program at any time without notice, for any reason in its sole discretion including for fraud prevention measures. CooperVision is not responsible for lost, late, illegible, stolen, or incomplete requests. All submitted materials become property of CooperVision and will not be returned. Limit one rebate per person per (12) twelve-month period based on purchase date and five (5) rebates per address and/or email address per (12) month period, except where prohibited by law. Excessive submissions and/or other fraudulent activities may result in federal prosecution under the U.S. mail fraud statutes (Title 18 U.S.C. Sections 1341 and 1342). Submissions made on behalf of a consumer by an eye care provider may result in the rejection of this rebate offer. If you elect to donate all, or part, of your rebate amount, all donated rebate money submitted between 07/01/2022 - 12/31/2022 will be contributed by CooperVision to Optometry Giving Sight. © 2022 CooperVision. If you don't have access to the internet, please call 1-877-875-6043 for assistance.

OPTOMETRY
giving sight

You can donate part of your rebate to provide sight to millions. Learn more at [coopervision.com/ogs](https://www.coopervision.com/ogs).

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 contact lenses, your claim must be based upon your payment less the amount of the rebate. If your doctor is filing the claim, you must notify the doctor's office of the need to deduct this rebate amount from the price used in calculating the claim.

Rebate will be paid in the form of a CooperVision Visa Prepaid card. Your rebate will be delivered via email with instructions for selecting your prepaid card. You must select your card within 3 months from the date these

