



We are so confident that you will love the comfort ACUVUE® contact lenses provide that if you're not 100% satisfied within 90 days we promise your money back†, no questions asked.



Why are we so confident that you will love your lenses?  
Because ACUVUE® makes contact lenses that are unbeaten in comfort.‡

take **COMFORT** in  
**ACUVUE®**

For more information ask your Eye Care Professional, or visit [ACUVUE.ca](http://ACUVUE.ca)

† Other terms and restrictions apply. See back for details or visit [acuvue.ca](http://acuvue.ca).

‡ The following ACUVUE® brand contact lenses have substantiated unbeaten in comfort claims: ACUVUE® OASYS Brand Family (including daily disposable), 1-DAY ACUVUE® MOIST Brand Family (within the category of hydrogel daily disposable), and ACUVUE® VITA® Brand spherical only.<sup>1,2,3</sup>

1. JJV data on file 2020. Claim for the family of ACUVUE® OASYS Brand Contact Lenses (2-week reusable) and ACUVUE® OASYS 1-Day with HydraLuxe® Technology using clinical trials cited on [www.clinicaltrials.gov](http://www.clinicaltrials.gov). (March 24, 2020).

2. JJV data on file 2020. Claim for ACUVUE® VITA® with HydraMax® Technology. Unbeaten in Comfort in Monthly Lens Category - using clinical trials cited on [www.clinicaltrials.gov](http://www.clinicaltrials.gov). (March 27, 2020).

3. JJV data on file 2020. Unbeaten Comfort of 1-DAY ACUVUE® MOIST Brand Family of Contact Lenses. (June 24, 2020).

**Important information for contact lens wearers:** ACUVUE® Contact Lenses are available by prescription only for vision correction. An eye care professional will determine whether contact lenses are right for you. Although rare, serious eye problems can develop while wearing contact lenses. To help avoid these problems, follow the wear and replacement schedule and the lens care instructions provided by your eye care professional. Do not wear contact lenses if you have an eye infection, or experience eye discomfort, excessive tearing, vision changes, redness or other eye problems. If one of these conditions occurs, remove the lens and contact your eye care professional immediately. For more information on proper wear, care and safety, talk to your eye care professional, call 1-800-267-5098, or download the Patient Instruction Guide.

# Reimbursement Certificate



## \* Required information

Patient's Name \* \_\_\_\_\_

Mailing Address (No P.O. Boxes) \* \_\_\_\_\_ Apt/Unit # \* \_\_\_\_\_

City \* \_\_\_\_\_ Province \* \_\_\_\_\_ Postal Code \* \_\_\_\_\_

YES, I would like to receive future emails with marketing communication and promotions for which I am eligible from Johnson & Johnson Vision Care division of Johnson & Johnson Inc. or its service providers appointed on its behalf. I understand I can withdraw my consent at any time by clicking the unsubscribe link at the bottom of the email communication in question or by sending an email to RA-MEDCA-jjvisioncar@ITS.JNJ.com to indicate my desire to be unsubscribed. If you checked YES, please provide the following information:

Email Address \_\_\_\_\_

A valid email address to receive status updates and check your reimbursement status online at [AcuvueCanadaRebates.ca](http://AcuvueCanadaRebates.ca). Without a valid email, you will not be notified.

Birth Date (MM/DD/YY) \_\_\_\_\_ Gender  M  F  O

Is this the first time you have purchased ACUVUE® Contact Lenses?  Yes  No

## What ACUVUE® product are you returning?

- |   |  |
|---|--|
| <input type="radio"/> 1-DAY ACUVUE® TruEye®               | <input type="radio"/> ACUVUE® OASYS with Transitions™                |
| <input type="radio"/> 1-DAY ACUVUE® MOIST                 | <input type="radio"/> ACUVUE® OASYS 1-Day with HydraLuxe® Technology |
| <input type="radio"/> 1-DAY ACUVUE® MOIST for ASTIGMATISM | <input type="radio"/> ACUVUE® OASYS 1-Day for ASTIGMATISM            |
| <input type="radio"/> 1-DAY ACUVUE® MOIST MULTIFOCAL      | <input type="radio"/> ACUVUE® OASYS with HYDRACLEAR® PLUS Technology |
| <input type="radio"/> 1-DAY ACUVUE® DEFINE®               | <input type="radio"/> ACUVUE® OASYS for ASTIGMATISM                  |
| <input type="radio"/> ACUVUE® VITA                        | <input type="radio"/> ACUVUE® OASYS for PRESBYOPIA                   |
| <input type="radio"/> ACUVUE® VITA for ASTIGMATISM        | <input type="radio"/> ACUVUE® 2                                      |
|   | <input type="radio"/> Other _____                                    |

What brand of contact lenses, if any, were you wearing before you purchased ACUVUE® Contact Lenses? \_\_\_\_\_

## Why are you returning your ACUVUE® Contact Lenses? I prefer (Check all that apply):

- |   |  |  |
|---|--|--|
| <input type="radio"/> The comfort of other contact lenses/glasses     | <input type="radio"/> The vision of other contact lenses/glasses | <input type="radio"/> No longer wearing any contact lenses |
| <input type="radio"/> The ease of use of other contact lenses/glasses | <input type="radio"/> The cost of other contact lenses/glasses   | <input type="radio"/> Other _____                          |

## Please complete all 6 steps within 90 days to receive your reimbursement cheque:

- Step 1** Read the TERMS & CONDITIONS below
- Step 2** Complete this original REIMBURSEMENT CERTIFICATE
- Step 3** Include all 3 items below in your envelope:
- An original REIMBURSEMENT CERTIFICATE with all required information filled out
  - A copy of your receipt (must show the number of boxes and valid purchase date)
  - Up to two open boxes** with the appropriate number of unopened blister packs  
**with at least:**
    - 60 unopened blister packs per 90-pack for all 1-DAY ACUVUE® products
    - 15 unopened blister packs per 30-pack for all 1-DAY ACUVUE® products
    - 2 unopened blister packs per box for all other products

- Step 4** For your records:
- Keep copies of the 3 items you are submitting
  - Make a note when you mailed your original REIMBURSEMENT CERTIFICATE and the amount requested
- Step 5** Mail to: ACUVUE® Rebates, 300 King St, Whitby, ON L1N 4Z4
- Step 6** Return all **unopened boxes** to the original place of purchase for refund or exchange in accordance with seller's policies.

**FOR SATISFACTION GUARANTEE, DOCUMENTS MUST BE RECEIVED WITHIN 90 DAYS OF YOUR PRODUCT PURCHASE DATE**

**HAVE A QUESTION?** Call 1-855-621-3981 to speak with a Customer Service representative or email [AcuvueCanadaPromotions@360incentives.com](mailto:AcuvueCanadaPromotions@360incentives.com).

**YOUR PRIVACY:** By submitting the above required information, and any optional information above, you agree that it will be governed by the Privacy Policy outlined on ACUVUE.ca. Please allow 8 weeks for delivery of your cheque from the time we receive your completed Reimbursement Certificate and documentation. Your personal data will be shared with 360insights who manage the rebates on behalf of Johnson & Johnson Vision Care division of Johnson & Johnson Inc. Your information will be transferred to countries outside of your country of residence, including the United States, which may provide for different data protection rules than in your country.

**\*TERMS & CONDITIONS:** If you submit a Reimbursement Certificate, you will not be eligible for any rebate offer. Your eligible product purchase must be made between September 1, 2020 and December 31, 2021. Your Reimbursement Certificate must be received by ACUVUE® within 90 days of product purchase date. Limit of one (1) reimbursement per customer. This offer is not valid in combination with any other offer, rebate or Reimbursement Certificate. Allow 8 weeks for delivery. Once we have received your Reimbursement Certificate and have begun processing it, our service provider on our behalf will email you to let you know we are working on your reimbursement. Johnson & Johnson Vision Care division of Johnson & Johnson Inc. is not responsible for lost, late or undelivered responses. This offer is valid for Canadian residents only and at participating Eye Care Professional retailers in Canada only. Purchases made through online retailers are not eligible for this offer. This offer is not valid where prohibited by law. Reimbursement will be sent in the form of a cheque. Maximum value of reimbursement for 2 open boxes is:

- |   |   |
|---|---|
| - 1-DAY ACUVUE® TruEye® 90-pack – up to \$200               | - ACUVUE® VITA 6-pack – up to \$110                     |
| - 1-DAY ACUVUE® TruEye® 30-pack – up to \$70                | - ACUVUE® VITA 12-pack – up to \$200                    |
| - 1-DAY ACUVUE® MOIST 90-pack – up to \$170                 | - ACUVUE® VITA for ASTIGMATISM 6-pack – up to \$140     |
| - 1-DAY ACUVUE® MOIST 30-pack – up to \$60                  | - ACUVUE® OASYS with Transitions™ 6-pack – up to \$120  |
| - 1-DAY ACUVUE® MOIST for ASTIGMATISM 90-pack – up to \$200 | - ACUVUE® OASYS with Transitions™ 25-pack – up to \$315 |
| - 1-DAY ACUVUE® MOIST for ASTIGMATISM 30-pack – up to \$70  | - ACUVUE® OASYS 12-pack – up to \$160                   |
| - 1-DAY ACUVUE® MOIST MULTIFOCAL 90-pack – up to \$220      | - ACUVUE® OASYS 24-pack – up to \$250                   |
| - 1-DAY ACUVUE® MOIST MULTIFOCAL 30-pack – up to \$70       | - ACUVUE® OASYS for ASTIGMATISM 6-pack – up to \$120    |
| - 1-DAY ACUVUE® DEFINE® 30-pack – up to \$70                | - ACUVUE® OASYS for PRESBYOPIA 6-pack – up to \$120     |
| - ACUVUE® OASYS 1-Day 90-pack – up to \$200                 | - ACUVUE® 2 6-pack – up to \$70                         |
| - ACUVUE® OASYS 1-Day for ASTIGMATISM 30-pack – up to \$90  |   |