

GUARANTEED TO HELP
YOU FALL ASLEEP



OR YOUR
MONEY BACK*

TYLENOL[®] PM

OFFICIAL MAIL-IN CERTIFICATE

TYLENOL[®] PM contains a pain reliever and nighttime sleep aid.

Purchases must be made between: 9/1/2019-7/31/2020. Reimbursement requests must be received by 9/1/2020.

First Name* _____ Last Name* _____

By checking this box, I attest that I am at least 18 years of age* Email Address* _____

Mailing Street Address* (No P.O. Boxes) _____

City* _____ State* _____ Zip* _____

(*Required fields)

Offer valid on the following products. Check off the purchased product. Offer is limited to one reimbursement claim.

TYLENOL[®] PM Extra Strength Liquid 8 oz liquid

TYLENOL[®] PM Extra Strength 24 ct. caplets

TYLENOL[®] PM Extra Strength 100 ct. caplets

TYLENOL[®] PM Extra Strength 150 ct. caplets

TYLENOL[®] PM Extra Strength 225 ct. caplets



Example UPC

Please write lot # here _____

(Write product UPC of one of the products above)

SEND

1. The original fully completed TYLENOL[®] PM Official Mail-In Certificate.
2. The original UPC label from the product.
3. Original receipt dated: 9/1/2019 through 7/31/2020 indicating ONE (1) TYLENOL[®] PM product purchased with purchase price circled.

MAIL TO

TYLENOL[®] PM Money Back Guarantee

Alta Resources
P.O. BOX 767
Neenah, WI 54956

RECEIVE

A reimbursement for ONE (1) TYLENOL[®] PM product (liquid or caplet form) purchase price up to \$30.00 USD (including tax).

TERMS AND CONDITIONS:

Offer limited to U.S. residents only, 18 years of age or older. Must be actual purchaser of the qualifying product. Offer valid on any **TYLENOL[®] PM** product (liquid or caplet form) purchase (see above for products available) made **9/1/2019-7/31/2020** that was purchased with cash or cash equivalent (no points or other non-monetary purchase methods). All reimbursement requests must be received at the mailing address **on or before 9/1/2020**. Requests received after 9/1/2020 will not be honored or acknowledged. No P.O. boxes. Check with your local post office for street address. Maximum value of the reimbursement equals up to \$30.00 USD, including tax. Actual value reimbursed will be based on individual purchase price paid plus tax, up to the maximum allowable amount. Participants will receive a check by mail, upon claim acceptance. Please allow 6-8 weeks for processing and delivery. If 18 years or older requirement, UPC write-in, and valid original sales receipt (with retailer name, accurate product description, purchase price and date) are not included in the request, the purchase price (up to \$30.00 USD) will not be reimbursed. **Offer is limited to ONE (1) reimbursement claim for the purchase of any ONE (1) TYLENOL[®] PM product (liquid or caplet form) per household street address.** Multiple product reimbursement requests per household or street address will not be honored. UPCs or receipts obtained through unauthorized means or illegitimate channels will be void. UPCs and receipts cannot be sold, traded, auctioned or bartered; all of which will be void. Fraudulent submission including use of multiple addresses to obtain additional reimbursements may result in federal prosecution under the U.S. Mail Fraud Statutes (18 U.S. Code, Section 1342). Not responsible for lost, late, misdirected, mutilated, illegible, incomplete, postage due, or undelivered responses.