

**\$10
OFF**



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To receive your rebate: You will receive \$10.00 when you fill in the information and send in the completed coupon along with a copy of your dated Fortical® Nasal Spray prescription receipt to:

PDI, 10 North Sussex St., Dover, NJ 07801-3912

By this form I agree that I am not eligible for reimbursement for this product by Medicaid, or any other federal or state program. Additionally, if I or someone else on my behalf is eligible for any reimbursement for this product from a government or third party payer, I will deduct the total amount of this rebate.

Signature

Date

You are not eligible for this offer if all or any part of the cost of your prescription is covered by a federal healthcare program, including Medicare or Medicaid, or by any similar state or federal program, including a state pharmaceutical assistance program. If you are a resident of Massachusetts or Michigan, this coupon is valid only if you are paying the entire cost of the prescription yourself (i.e., your insurance does not cover any of the cost of your prescription). This offer may not be used with any other discount coupon or offer. Offer only applies to prescriptions filled and submitted for rebate before December 31, 2009. Please allow 6 to 8 weeks for delivery. Offer good only in USA. Offer void where prohibited by law, taxed, or restricted. Limit one per purchase. Upsher-Smith Laboratories reserves the right to rescind, revoke, or amend this offer without notice at any time. This coupon may not be reproduced.