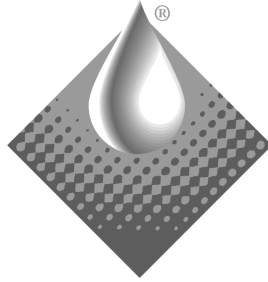


Request Form:

# Nizoral<sup>®</sup>

A-D KETOCONAZOLE SHAMPOO 1%



Official Mail-In Certificate

Offer Expires 12/31/17

All fields are required

**Mail To:**

NIZORAL<sup>®</sup> Money Back Guarantee  
Johnson & Johnson Consumer Care Center - 5th Floor  
120 N Commercial Street  
Neenah, WI 54956

Your name, address, and any other identifying information you provide will be available to Johnson & Johnson Consumer Inc. We will not disclose your information to anyone else except upon governmental request. The information you submit will be governed by our privacy policy <https://www.nizoral.com/privacy>. You can request that your information be removed at any time from our contact list by calling 1-800-962-5357.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Mailing Address (No PO Boxes): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Yes, I'm 18 years or older.

**I have enclosed with this completed form:**

- Original store-identified sales receipt or online order confirmation email with NIZORAL<sup>®</sup> product(s) purchase price circled
- Original UPC(s) from one of the following:
  - one (1) NIZORAL<sup>®</sup> A-D Shampoo 4 oz;
  - one (1) NIZORAL<sup>®</sup> A-D Shampoo 7 oz

**I acknowledge that I (please check in order to redeem):**

- Have Used NIZORAL<sup>®</sup> product as directed for the past 56 days and am not satisfied

Signature: \_\_\_\_\_