

NESTLE' PURINA / MERRICK - SPECIALTY RETAILER AND VETERINARIAN COUPON REDEMPTION FORM

MAIL TO: Nestlé Purina PetCare
 Inmar Dept. # 17800
 801 Union Pacific Blvd, STE 5
 Laredo, TX 78045

RETAILER or CLINIC
 INVOICE or
 REFERENCE #:

INVOICE DATE: _____

RETAILER or CLINIC NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____

**SEPARATE AND COUNT ACCORDING TO FACE VALUE OF COUPON.
 MARK RETAIL PRICE ON FREE GOODS COUPONS. Mail in coupons with this invoice.**

NUMBER OF COUPONS	FACE/DOLLAR VALUE	TOTAL
X		=
X		=
X		=
X		=
X		=
X		=
X		=
X		=
	SUB TOTAL	=
	# COUPONS X .08 HANDLING CHGE	=
	* POSTAGE	=
	GRAND TOTAL	=

***NO REIMBURSEMENT FOR CERTIFIED OR REGISTERED MAIL
 FOR ADDITIONAL FORMS OR OTHER INFORMATION, PLEASE CALL 1-800-285-7602**