## \$10.00 Mail-In Rebate on OMRON<sup>®</sup> CompAir Nebulizer System (model NE-C801) <u>or</u> OMRON<sup>®</sup> CompAir Pediatric Nebulizer (model RE-C800KD)

- 1. Complete this mail-in rebate form
- 2. Remove the UPC symbol from the original packaging of OMRON<sup>®</sup> CompAir Nebulizer System (model NE-C801) or OMRON<sup>®</sup> CompAir Pediatric Nebulizer (model RE-C800KD)
- 3. Submit the original, store-identified cash register receipt dated between 3/1/22 and 2/28/23. Circle the product name, purchase price, and purchase date on your receipt.
- 4. Mail the following: one (1) REBATE FORM, one (1) original package UPC CODE, and one (1) original RECEIPT in each mailing. Copies not accepted. Must be received by 3/31/23.

MAIL TO: Inmar Rebate Center Omron \$10.00 Rebate Program OMRON22B P.O. Box 426008, Laredo, TX 78044-6008

Name		
Mailing Address		
City	State	Zip
Email		

Why did you purchase the OMRON brand of nebulizer instead of another brand? (Select all that apply)

- □ It was recommended by a medical professional
- It was recommended by family/friend
- □ I researched and found it to be best for my needs
- □ Good price for the product
- Rebate offered additional savings
- □ Better features/benefits than other brands
- Familiar with the brand
- Other\_\_\_\_

Offer valid between March 1, 2022 – February 28, 2023 on OMRON<sup>®</sup> CompAir Nebulizer System (model NE-C801) <u>or</u> OMRON<sup>®</sup> CompAir Pediatric Nebulizer (model RE-C800KD). Submission must be received by March 31, 2023. Only one submission is accepted per family, household or address. You must be eighteen years of age or older to participate. Your receipt must be dated 3/1/22 - 2/28/23 and must have the product name, purchase price, and purchase date circled. No photocopied, altered, substitute or counterfeit rebate forms, receipts or UPC bar codes will be accepted or returned. Offers are open to United States addresses and purchases only. All submissions become the property of OMRON Healthcare, Inc. and will not be returned. Allow 8 to 10 weeks for delivery of \$10.00 rebate check. OMRON Healthcare, Inc., its affiliates or agents are not responsible for mail not received as a result of loss, damage, or delays by the U.S. Post Office. Submission must be received by 3/31/23 to qualify. All disputes and claims of non-payment will require you to provide a photocopy for substantiation of your entire submission.

For rebate inquiries, please visit www.inmarrebates.com For Omron<sup>®</sup> customer service call toll free: 1.866.216.1333 or visit www.OmronHealthcare.com

Your data will be used to give us demographic information about the audience requesting a rebate. We use this to understand that audience and to improve our offerings to our customers. The personal information you provide - name, address, email address, etc. - allows us to inform you of additional special offers which may be forthcoming, and to send you coupons, or notify you of products and services of our affiliates.

Please check here  $\Box$  if you would like to participate in this opportunity.