

REQUIRED INFORMATION Please print clearly.			HOW TO CLAIM YOUR REBATE:			
NAME			. BUY:	MS	6D Black 6A (PN 62013) or 6D Black 6AL(PN 64253) ition Control	
ADDRESS			SEND:	2. /	This completed form. A COPY of your receipt with MSD products circled and dated	
CITY	STATE	ZIP CODE		- 1	between 7/01/16 and 8/31/16.	
PHONE NUMBER			MAIL	De _l PO	D Rebate ot #: MD16-3213 Box 472 ottsdale, AZ 852-0472	
EMAIL ADDRESS		ill only use this to communicate you about the state of your rebate	RECEI		S25 Cash Reward Card	
ORDER NUMBER						
What's your project? (Year, Make, Model)				Stay informed, get MSD news hot off the press! Yes, sign me up!		
				Newsle	etters Releases	
			[Promo	tions	
			N	o, I'm alrea	ndy getting enough email.	

TERMS AND CONDITIONS

Requests must be postmarked by September 15th 2016. Void where taxed, restricted or prohibited. PO boxes will not be paid. Allow six to eight weeks after mailing for delivery of your reward card. MSD reserves the right to confirm identification. Fraudulent submissions could result in federal prosecution under US Mail fraud statutes (18 USC Sections 1341 and 1342). MSD reserves the right to substitute a check of equal value in lieu of a reward card at its discretion.

The American Express® Reward Card can be used at U.S. merchants that accept American Express® Cards. Subject to applicable law, a \$2.00 monthly service fee will be assessed against the card balance starting 7 months after Reward Card issuance. Funds do not expire. No ATM cash withdrawal. Some limitations apply, including restriction on use at cruise lines or for recurring billing. See Cardholder Agreement for complete details. Card cannot be redeemed for cash, except where required by law. This Card is issued pursuant to a loyalty, reward or other promotional program. Card is issued by American Express Prepaid Card Management Corporation.