

# Glucerna® Great Taste Guarantee Money Back Guarantee Refund Request Form



Glucerna® Shakes  Rich Chocolate  Homemade Vanilla  Creamy Strawberry  Classic Butter Pecan  Chocolate Caramel

Glucerna Hunger Smart® Shakes  Rich Chocolate  Homemade Vanilla  Creamy Strawberry

Glucerna Hunger Smart® Meal Size Shakes  Rich Chocolate  Homemade Vanilla

Glucerna Hunger Smart® Powder  Rich Chocolate  Homemade Vanilla

Glucerna® Snack Bars  Dark Chocolate Almond  Crispy Oats & Nuts  Chocolate Chip  Peanut Chocolate Chip

Glucerna® Mini Treats  Chocolate Peanut  Oatmeal Raisin  Chocolate Caramel

Glucerna® Snack Shakes  Rich Chocolate  Homemade Vanilla

Reason for refund:

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Mail refund to:

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Date Purchased:*	
First Name:	
Last Name:	
Address:	
City:	
State:	
Zip:	

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<b>Email Address:</b>	
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Note: email address will be used to confirm refund.

\*Refund request must be postmarked within 30 days of purchase.

**Purchase amount:** \$\_\_\_\_\_

**To request your refund, send in:**

- Your UPC from your Glucerna packaging
- Your original register receipt with purchase price (maximum refund of \$10.00 USD)
- Also, circle any discount that applies
- This completed Money Back Guarantee refund request form mailed to the following address:

Abbott Nutrition  
PO Box 68  
Plover, WI 54467-9800  
ATTN: Glucerna Great Taste Guarantee

## Official Rules for Glucerna Great Taste Guarantee Terms and Conditions

1. LIMIT ONE REFUND PER HOUSEHOLD.
2. Refund for purchase NOT TO EXCEED NORMAL RETAIL PRICE, including tax.
3. Limited to purchases and reimbursement requests made within the 50 United States and Washington, D.C.
4. Money Back Guarantee applies to a refund on one purchase per household. Therefore, if multiple purchases are made on the same receipt or at different times, only one purchase will qualify (maximum refund price \$10.00 USD).
5. Must apply for Money Back Guarantee through Abbott Nutrition. The Money Back Guarantee cannot be honored by retailers.
6. Refund request can be made on the preprinted form or on a sheet of paper. We appreciate you telling us the reason for your request. Mail refund request, including name, address, UPC from your Glucerna packaging, and original register receipt with purchase price circled (also circle discount if applicable) to: Abbott Nutrition PO Box 68 Plover, WI 54467-9800, ATTN: Glucerna Great Taste Guarantee.
7. Refund request must be postmarked within 30 days of purchase.
8. No group or organization requests will be honored.
9. Not responsible for undelivered, stolen, damaged, or postage due requests.
10. Fraudulent, incomplete, or illegible requests will not be honored.
11. All refunds will be made by check.
12. Please allow 4-6 weeks for delivery of refund check.
13. Void where prohibited.
14. For more details call 1-877-745-8237.