

Save Up to \$12.⁰⁰ on ZIMECTERIN[®] Gold!

(ivermectin/praziquantel)

Buy at least six tubes of ZIMECTERIN[®] Gold between February 1 and June 30, 2011 and receive a \$1.00 rebate on each tube. Maximum rebate is \$12.00. To receive your rebate, please mail the original invoice(s) or a clear photocopy, along with this original, completed coupon and proof of purchase (box tops or UPCs) to the address below:

ZIMECTERIN Gold Spring 2011 Rebate
PO Box 660277

Birmingham, AL 35266-0277

Submission must be postmarked by July 31, 2011.

*Please complete the back of
this coupon prior to submission.*



www.zimecteringold.com



Name: _____

Address: _____

City: _____

State: _____ ZIP: _____

Phone: (_____) _____

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Limit one rebate per household. Allow six to eight weeks for rebate. Merial reserves the right to cancel or modify this rebate at any time. Rebate requests postmarked after July 31, 2011 will not be honored. Not valid where prohibited by law or regulation. All federal, state and local laws and regulations apply. No substitutions or transfer of goods permitted, except at the sole discretion of the sponsor. Rebate offer valid for horse owners only. Direct Merial customers (veterinarians and dealers) do not qualify for this rebate. Only individual original rebate certificates submitted by the horse owner, trainer or stable manager will be accepted. ®ZIMECTERIN is a registered trademark of Merial Limited. ©2011 Merial Limited, Duluth, GA. All rights reserved. EQUI ZIM 1110-B (01/11).

Purchased At (Business Name): _____ Date: _____

City: _____ State: _____

Which of the following best describes your primary role relative to horses?

____ Horse Owner ____ Trainer/Stable Manager Other: _____

How many horses do you own/are responsible for?: _____

Was this your first purchase of ZIMECTERIN Gold? ____ Yes ____ No

Will you purchase ZIMECTERIN Gold in the future? ____ Yes ____ No

How often do you deworm your horse(s) per year? _____

Do you currently rotate dewormers during the year? ____ Yes ____ No

May we send you information and discount coupons via e-mail? ____ Yes ____ No

E-mail: _____

**Please Indicate
Number of Tubes Purchased:**

DVRSADONL01/11