How to claim your money b	McAp	oney Back plication	the post
 Print application form or Complete (IN BOLD CAPI' Send with all till receipts Purina ONE - Visible Diff 	TALS)	(within 3 months of receip	t date) to:
Title:	First Name (mandatory):		
Surname (mandatory):			
House no. / name (mandator	ry):		
Address Line 1:			
Address Line 2:			
Post Code (mandatory):		D.O.B:	
Email:			
Telephone number:			
How many cats do you have?	•		
Age(s) Cat 1	Cat 2	Cat 3 Ca	at 4 Cat 5
How did you hear about the Purina ONE Pack	Purina ONE Money Back Gua Supermarket Magazine	orantee? Supermarket	Supermarket Website
Purina ONE Website	Facebook Page	Other	
Statement 15 words or more	(mandatory): <i>I did not see a</i>	visible difference in my cat	because
At Nestlé Purina PetCare (UK) Ltd, w If you are happy to receive this com If you would like to receive more inf	munication, please tick here		_

Your Pet, Our Passion.