



Refund Form

Thank you for trying BOOST® Nutritional Drink. To receive a refund for your purchase of BOOST®, just complete this form and follow the instructions below.

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

EMAIL: _____ PHONE: _____

We're always interested in improving the taste of our products. Please let us know what you didn't like about the flavor you tried.

Product purchased:

- | | | |
|--|--|--------------------------------------|
| <input type="checkbox"/> BOOST® ORIGINAL
READY-TO-DRINK | <input type="checkbox"/> BOOST® WOMEN
BOOST GLUCOSE CONTROL®
BOOST GLUCOSE CONTROL®
MAX 30g PROTEIN | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> BOOST PLUS® | | |
| <input type="checkbox"/> BOOST® HIGH PROTEIN | | |

- Flavor:**
- | | | |
|--|-----------------------------------|--------------------------------------|
| <input type="checkbox"/> Chocolate | <input type="checkbox"/> Vanilla | <input type="checkbox"/> Strawberry |
| <input type="checkbox"/> Peaches & Creme | <input type="checkbox"/> Cinnabon | <input type="checkbox"/> Other _____ |

Please send me offers and promotions from Nestlé Health Science and its affiliates.

TERMS AND CONDITIONS

*The BOOST® Great Taste Guarantee offer only applies to the purchase of one (1) BOOST® Nutritional Drink 4-pack or 6-pack up to a maximum refund price of \$14.99, excluding sales tax. All purchases must be made between January 1, 2024 and December 31, 2024, as shown on the original purchase receipt in order to qualify for a refund. Not valid with any coupons for free BOOST® products.

To be eligible for a refund, consumer must submit the following items:

- 1) Actual UPC from BOOST® Nutritional Drink multipack.
- 2) Original product receipt that shows a purchase date between January 1, 2024 and December 31, 2024, with the line item circled or highlighted (photocopies of receipts will not be accepted).
- 3) Completed Refund Form. Consumer must send all items to:

BOOST GREAT TASTE GUARANTEE REFUND
PO Box 1612
Evansville IN 47706-0013

LIMIT ONE REFUND PER NAME, ADDRESS OR HOUSEHOLD. Limit one original cash register receipt per refund request. All refund requests must be postmarked by December 31, 2024 and received by January 15, 2025. Requests from employees, retailers, distributors, healthcare providers, resellers, groups, clubs, or organizations will not be honored. Duplicate, fraudulent, incomplete, or illegible requests will not be honored or acknowledged. Not responsible for lost, late, or undeliverable responses. Rights to the refund are not assignable or transferable. Allow 6 to 8 weeks for mailing of refund check. Offer valid only in the 50 United States and D.C. Void where prohibited, taxed, or restricted. All trademarks are owned by Société des Produits Nestlé S.A., Vevey, Switzerland. © 2024 Nestlé.

For more details, call 800-247-7893.