

\$20 MAIL-IN REBATE

on any Oral-B® Professional Series electric toothbrush purchased at your dental office or at a retail outlet.



Oral-B® Professional™ Precision 5000™ with Deep Sweep™ brush head provides

UP TO 50% MORE BRUSH MOVEMENTS vs. Sonicare FlexCare*

Simply complete this form and mail it back to us by July 15, 2013 with the original dated receipt from any dental office or retail outlet.

To receive your payment card by mail:

BUY:

Any Oral-B Professional Series electric toothbrush from any dental office or retail outlet (excludes Costco Professional Care® Advantage Dual Handle Pack, Professional Care™ 8850, Vitality™, PRO-HEALTH™, Cross Action® Power, Complete Action, 3D White Action, and Refill Heads. Also excludes trial/travel sizes.)

MAIL:

1. This original form
2. Original UPC barcode from the package
3. Original dated receipt with dental office/store name and product purchase price circled

Place the above in a stamped envelope and mail to:

Oral-B Power \$20 Rebate
Dept. Z
PO Box 7302
South Bend, IN 46634-7302

Trust is a cornerstone of our corporate mission, and the success of our business depends on it. P&G is committed to maintaining your trust by protecting personal information we collect about you, our consumers. For full details of our privacy statement, go to: <http://www.pg.com/privacy.html>

* Sonicare is a registered trademark of Philips Oral Healthcare, Inc.

© 2012 P&G ORAL-13711

SAVE \$20 BY MAIL**

** Rebate applies to the price paid after any coupon or discount was applied.



Offer begins January 1, 2013 and ends June 30, 2013. Your request must be postmarked by July 15, 2013. Additional Terms: Offer cannot be combined with any other offer, including coupons.

Offer limited to U.S. residents only. Limit two submissions per name, address, or envelope (except where prohibited). Use of multiple addresses or P.O. boxes to obtain additional refunds is fraud and may result in prosecution. Any submissions in excess of the limits set forth above will not be acknowledged or returned. This form must accompany your request. Reproduction, alteration, sale, trade, or purchase of this form or proof of purchase is prohibited. Proof of purchase must be obtained from product purchased by you. No requests from groups, clubs, or organizations will be honored. Rebate will be paid via pre-paid card. Please allow 6-8 weeks for delivery. For the status of your rebate, go to www.therebatecenter.com/pgrebates or call 1-888-292-0702.

Please print clearly—proper delivery depends on a complete and correct address.

First Name	Last Name
Address	Apt#
City	State
Zip Code	Date of Birth (MM/YY)
E-mail Address (optional)	

- Yes! I'd like to receive information and special offers from Oral-B.
- Yes! I want to be among the first to receive special offers, savings, and samples from P&G brands and the P&G Everyday Solutions monthly e-mail newsletter.