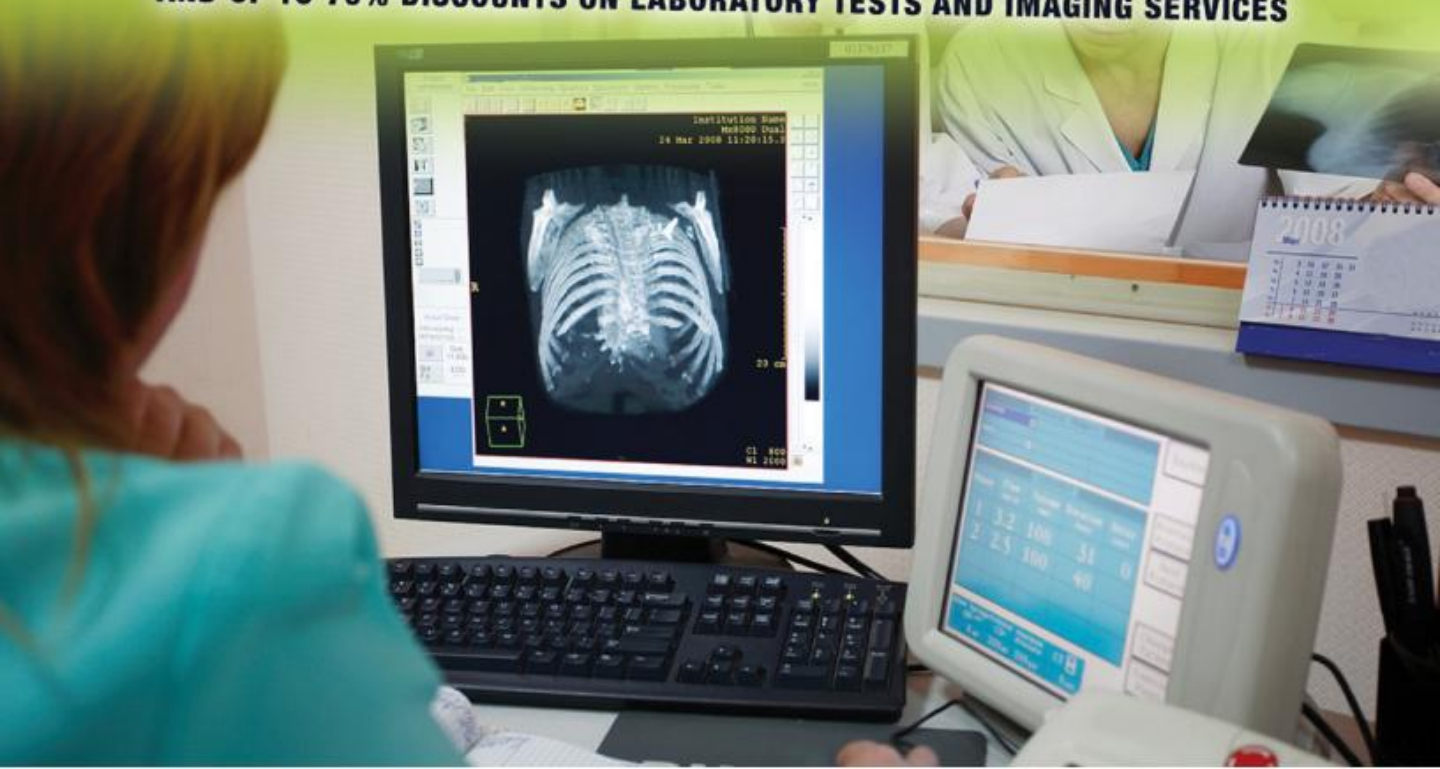




**FREE HEALTHCARE DISCOUNT CARD**

**UP TO 75% DISCOUNTS ON PRESCRIPTION MEDICATIONS**

**AND UP TO 70% DISCOUNTS ON LABORATORY TESTS AND IMAGING SERVICES**



THE CERTIFICATE IS  
COMPLIMENTS OF:



# Free Healthcare Discount Card

In these tough economic times, millions of people are struggling with healthcare costs. We are sponsoring a FREE program offering up to 75% discounts on prescription medications and up to 70% discounts on laboratory tests and imaging services. We are committed to help all those in need of this valuable FREE Healthcare Discount Card. Everyone qualifies. No Enrollment Required. All the major brand name pharmacies accept this card. Activate your certificate today and instantly print your card.

## Terms & Conditions

This certificate is void if sold to the recipient. Recipient must have internet access and the ability to print out the Free Healthcare Discount Card. This certificate is good for a Free Healthcare Discount Card that can save you up to 75% off name brand and generic prescription medications and up to 70% off laboratory screening tests and imaging services. Anyone with or without insurance can use this program to access savings. Go to [www.FunRewardsForYou.com](http://www.FunRewardsForYou.com) to redeem this certificate over our secure server. After you redeem this certificate you will then instantly be able to print out your Free Healthcare Discount Card. Simply print the card out, walk in to the pharmacy or call our labs and imaging hotline to start saving on your Healthcare costs. THIS IS NOT INSURANCE NOR IS IT A REPLACEMENT FOR ANY INSURANCE YOU MAY HAVE. \*\*Customers without internet access: We will be more than happy to mail you your Free Healthcare Discount Card. Simply mail this certificate to us with a Self Addressed Stamped Envelope and we will return it with your Free Healthcare Discount Card enclosed. If you mail us a certificate without a SASE enclosed we will not process your certificate.



**SAMPLE**

## SHIPPING INFORMATION

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_  
Zip Code: \_\_\_\_\_  
Country: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

I agree to terms and conditions

Signature: \_\_\_\_\_