



OFFICIAL RULES FOR THE CORAZONAS® CHALLENGE

Corazonas Foods is challenging Americans to reduce their cholesterol in 28 days by adopting a heart-healthy lifestyle that includes Corazonas Chips! Since Corazonas Heart-Healthy chips are [clinically proven to help lower LDL cholesterol by up to 15%](#), the Corazonas team encourages people to have their cholesterol tested before and after the challenge to measure the reduction in both total and LDL cholesterol levels.

To participate in the Corazonas Challenge, one must follow the below guidelines in adopting a heart-healthy lifestyle:

- 1) Consume at least two, 1oz servings of Corazonas heart-healthy chips with meals for 28 consecutive days
- 2) Incorporate heart-healthy nutrition and exercise as part of your daily regimen – visit www.corazonaschallenge.com for tips and recipes
- 3) Take a cholesterol test that measures LDL cholesterol within 10 days following the 28 day challenge

If after 28 days participants did not lower their cholesterol, Corazonas Foods will reimburse the cost of chips (up to \$24), provided original receipts and/or proofs of purchase and proof of cholesterol test are included with redemption form and all other rules (detailed below) are adhered to. Full details follow.

Void where prohibited, taxed or restricted. Offer starts 1/1/09 and ends 12/31/09. All claims must be postmarked no later than 1/30/10 and received no later than 2/15/10.

How to Claim: To receive a check for a maximum refund of \$24.00, send an original request form (below) and mail it with:

- a) Original store-identified cash register receipt(s) from any 28 day period between 1/1/09 – 12/3/09 with the purchase price(s) circled.
- b) Original proof of having had a cholesterol screening or purchased a cholesterol testing kit within 10 days following the 28 day challenge. *Actual results of test are not required, only proof of having taken or purchased a cholesterol test between 1/29/09 and 12/31/09.* Reproduced proofs of cholesterol test and cash register receipts are prohibited and will not be reimbursed or returned.
- c) Self-addressed Stamped Envelope with proper return postage.
- d) Name, address and a brief description of why you were unsatisfied with CORAZONAS® (see form below).

d) Send to:
CORAZONAS® Challenge
11900 W. Olympic Blvd #630
Los Angeles, CA 90064

Please note: Invalid redemption requests will not be fulfilled or returned and submitters will not be notified by Corazonas regarding invalid submissions.



Eligibility: Valid in USA only. Limit one redemption per family, household or address. Limit to one (1) submission per family, household or address for the period 1/1/09 - 12/31/09. No group or organization requests. Original proofs of cholesterol test and cash register receipts only - reproduced proofs of cholesterol test and cash register receipts are prohibited and will not be reimbursed. No receipts or proofs of purchase will be returned and submitters will not be notified by Corazonas of invalid submissions. Only one request per stamped envelope. Maximum refund of \$24.00. Eligible customers will be refunded only the actual amount spent on the CORAZONAS® product; Sales tax, coupons or other discounts at time of purchase will not be factored into the amount and will not be reimbursed or otherwise credited. Allow 8 weeks for mailing of check.

General: Participants assume all risk of loss, damage, destruction, delay or misdirection of materials/mail/email submitted to Sponsor. Participant agrees to abide by the Official Rules and to honor decisions of Sponsor, which are final and legally binding in all respects, and further agrees that all refunds are awarded upon the condition that Sponsor, its promotion agencies, printers, suppliers of promotional materials, or any of their respective parent companies, subsidiaries, officers, directors, partners, principals, partnerships, employees or agents shall have no liability whatsoever, and shall be held harmless for any injuries, losses, or damages of any kind to persons or property, including death, sustained, in whole or in part, directly or indirectly, in connection with or resulting from acceptance, possession or use/misuse of any refund. Sponsor reserves the right, in its sole discretion, without prior notice and at any time, to cancel, terminate or suspend this promotion should virus, bugs, nonauthorized human intervention or other causes beyond the control of Sponsor corrupt or impair the administration, refund redemption, security, fairness or proper entry to the offer. Sponsor reserves the right to verify requests suspected of being invalid and to decline submissions that are inconsistent with terms.

SPONSOR: Corazonas Foods Inc., 11900 W. Olympic Blvd #630, Los Angeles CA 90064.



CORAZONAS® Challenge Redemption Form

To be reimbursed for the cost of CORAZONAS® chips, purchased between 11/2/08 – 11/30/09, follow the directions below. Requests must be postmarked by 12/15/09 and received no later than 12/31/09. Invalid redemption requests will not be fulfilled or returned and submitters will not be notified by Corazonas regarding invalid submissions

To receive a check for up to \$24.00,* please complete this original redemption form and mail it with:

- a) Original store-identified cash register receipt(s) dated between 1/1/09 – 12/3/09 with the purchase price(s) circled, and
- b) Original proof of having had a cholesterol screening or purchased a cholesterol testing kit within 10 days following the 28 day challenge. Actual results of test are not required, only proof of having taken or purchased a cholesterol test between 1/29/09 and 12/31/09.
- c) Self-addressed Stamped Envelope with proper return postage
- d) Completed form below

*(Actual refund check will be your CORAZONAS® purchase amount up to a maximum refund of \$24.00. Sales tax, coupons or other discounts at time of purchase will not be factored into the amount and will not be reimbursed or otherwise credited.)

Send all items above to:
CORAZONAS® Challenge
11900 W. Olympic Blvd #630
Los Angeles, CA 90064

Name *(Please print)*: _____

Address: _____ Apt/Suite: _____

City: _____ State: _____ Zip: _____

Email: _____

If you participated in the CORAZONAS® Challenge and were dissatisfied with the results, please tell us why: _____

Terms and Conditions: Valid in USA only. Limit one redemption per family, household or address. Limit to one (1) submission per family, household or address for the period 1/1/09 - 12/31/09. No group or organization requests. Original proofs of cholesterol test and cash register receipts only - reproduced proofs of cholesterol test and cash register receipts are prohibited and will not be reimbursed. No receipts or proofs of purchase will be returned and submitters will not be notified by Corazonas regarding invalid submissions. Only one request per stamped envelope. Offer expires 12/31/09. Void where prohibited, taxed or restricted by law. Allow 8 weeks for mailing of check. See www.CorazonasChallenge.com for official rules. © 2009 Corazonas Foods, Inc.