











## **OPERATOR INFORMATION**

I am a Foodservice Operator in:

College & University Healthcare

Lodging Retirement Living

B&I

**Establishment Name** 

Contact Name

**Contact Title** 

Mailing Address

City State Zip

Phone

**Email Address** 

To receive additional offers and communications from General Mills Foodservice

Chain/Food Management/Buying Group

Distributor House

City State

**DSR Email Address** 

To receive more information related to this rebate and similar products

MAIL WITH PROOFS OF PURCHASE TO:

Must be postmarked on or before

## **CALCULATE YOUR REBATE**

Cases Purchased Rebate Per Case Total

X

Total Rebate (\$100 maximum)

## TO RECEIVE YOUR REBATE









