



It's a Beautiful Day for Savings!

ACT NOW! OFFER ENDS MAY 31, 2021

# TRY UDI'S® FOR FREE!

Buy one case of eligible Udi's® product and receive a rebate for the purchase price\*!

Udi's® is the #1-selling dedicated gluten-free baked goods brand in the US<sup>1</sup>, offering great taste and pleasing texture for a wide variety of menu options any time of day. Many products are dairy, soy, and nut free too! With Udi's® as your partner, setting up your operation to sell gluten-free items is a snap – ask your Conagra sales representative to find out how.

Udi's® is always gluten free and delight full – try it today!

This offer is valid only on the following Udi's® products:

- |   |   |
|---|---|
| Blueberry Muffin IW 36 ct. 9899780645               | French Classic Dinner Roll IW 36 ct. 9899780706   |
| Double Chocolate Muffin IW 36 ct. 9899780646        | 12" Classic Hoagie Roll IW 12 ct. 9899780702      |
| Chocolate Chip Cookie IW 36 ct. 9899780665          | Classic Hot Dog Bun IW 24 ct. 9899780620          |
| Snickerdoodle Cookie IW 36 ct. 9899780687           | <b>Classic Hamburger Bun IW 24 ct. 9899780644</b> |
| <b>Soft White Sandwich Bread 6 ct. 9899780901</b>   | Small Classic Hamburger Bun IW 24 ct. 9899780705  |
| <b>Multigrain Sandwich Bread 6 ct. 9899780902</b>   | 12" Pizza Crust Par-Baked 2/10 ct. 9899780635     |
| Plain Bagel IW 24 ct. 9899780660                    | 10" Pizza Crust Par-Baked 2/10 ct. 9899780643     |
| Whole Grain Seeded Dinner Roll IW 36 ct. 9899780676 | Extra Large Plain Tortilla 4/10 ct. 9899780787    |



- ✓ Certified Gluten-Free
- ✓ No Soy Ingredients
- ✓ No Dairy Ingredients
- ✓ Kosher Parve

## INSTRUCTIONS

- \*MAXIMUM REBATE OF \$50.00/1 FREE CASE PER CUSTOMER.
- Purchase one case of Udi's® product from the approved list above between April 1, 2020 and May 31, 2021. Rebate submissions must be postmarked by June 30, 2021.
- Complete and send this form along with your distributor invoice or clear copy as proof of purchase (circle product and price paid – do not highlight) to the following address. Operator name and address must appear on the distributor invoice. Illegible copies of proof of performance will be rejected.

Udi's Free Case Rebate  
PO Box 2025 - FS-2453, Brownsdale, MN 55918

Or for express 2-4 week processing, simply upload your distributor proof of purchase to:

fspromos4u.com/conagra  
Access Code: Udis2020

Only one redemption per establishment. Chains must participate on an individual outlet basis. This offer cannot be combined with other rebates, allowances, contracted or bid business or used to redeem against other rebate offers. Offer invalid for resale, cash/carry and club stores. Cases redeemed against this offer may not be used to redeem against any other rebate offers. Partial cases not accepted. Rebates cannot be assigned or transferred. Offer valid for foodservice operators only; suppliers or distributors cannot redeem rebates for operators. We reserve the right to audit requests for payment and reserve the right to cancel this offer at any time. This rebate may be mechanically reproduced or photocopied but not altered from its original format. All rebates must be postmarked by June 30, 2021. VOID IF RESTRICTED OR PROHIBITED BY LAW.

Reference number: FS-2453

800-357-6543 or  
www.conagrafoodservice.com



<sup>1</sup>2019 IRI Data  
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FSP-1019-URFeb-1120

## TO RECEIVE YOUR REBATE COMPLETE THE FORM BELOW IN FULL.



I have purchased a case of qualifying Udi's® product and have attached my distributor invoice as proof of purchase. Please send me my rebate!

NAME \_\_\_\_\_

TITLE \_\_\_\_\_

ORGANIZATION \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_

SIGNATURE \_\_\_\_\_  YES! INCLUDE ME ON EMAIL OFFERS FROM CONAGRA FOODSERVICE.

1. My foodservice operation can best be described as:

- |  |   |   |   |
|--|---|---|---|
| <input type="checkbox"/> Hospital          | <input type="checkbox"/> Long-Term Care         | <input type="checkbox"/> K-12 School        | <input type="checkbox"/> Business Dining          |
| <input type="checkbox"/> Casual Dining     | <input type="checkbox"/> Family Dining          | <input type="checkbox"/> Bar/Tavern         | <input type="checkbox"/> Recreation/Entertainment |
| <input type="checkbox"/> Convenience Store | <input type="checkbox"/> Catering               | <input type="checkbox"/> College/University | <input type="checkbox"/> Sandwich/Bakery Café     |
| <input type="checkbox"/> QSR               | <input type="checkbox"/> Other (specify): _____ |   |   |

2. Dayparts served (check all that apply):  Breakfast  Lunch  Dinner  Snacks/Takeout

3. Number of units (if applicable): \_\_\_\_\_

4. Annual sales at this location:

- \$0 - \$499,999     \$500,000 - \$749,999     \$750,000 - \$999,999     Over \$1,000,000

5. I currently have the following number of designated gluten-free items on my menu:

- 0-5     6-10     11-15     Over 15

6. I plan to purchase the following gluten-free baked goods in the next 30 days:

- |                                       |  |   |   |
|---------------------------------------|--|---|---|
| <input type="checkbox"/> Breads/rolls | <input type="checkbox"/> Pizza crusts  | <input type="checkbox"/> Hot dog/hamburger buns | <input type="checkbox"/> Tortillas/wraps        |
| <input type="checkbox"/> Bagels       | <input type="checkbox"/> Muffins/cakes | <input type="checkbox"/> Cookies                | <input type="checkbox"/> Other (specify): _____ |

7. I have purchased other gluten-free baked goods brands in the past 30 days:

- Yes     No    If yes, please specify brand(s): \_\_\_\_\_