



Eligible Products

| Code | Product Information |
|------|---------------------|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |



OPERATOR INFORMATION

All fields required for redemption.

(Check ONE) I am a Foodservice Operator in the following segment:

Restaurant C-Store College & University Lodging
 B&I Healthcare Independent Bakery Other

Establishment

Contact Name

Contact Title

Mailing Address

City State Zip

Phone

Email Address
To receive additional offers and communications from General Mills Foodservice.

Distributor House

Distributor City Distributor State

DSR Name

DSR Email
To receive additional offers and communications from General Mills Foodservice.

CALCULATE YOUR REBATE

| Product Type | # of cases | Cost per case | Total |
|----------------------|--|-----------------------|---|
| | | X | = |
| | | X | = |
| | | X | = |
| | | X | = |
| | | X | = |
| | | X | = |
| | | X | = |
| | | X | = |
| Total Cases = | <small>(2 case minimum 16 case maximum)</small> | Total Rebate = | <small>(\$500 maximum)</small> |

TO RECEIVE YOUR REBATE



generalmillscf@reply4info.com
 1-888-882-9860