REBATE CLAIM FORM

Spring Fleet/Fuel Marketer Rebate Diesel Kleen +Cetane Boost, Clear-Diesel Fuel & Tank Cleaner and Bio Kleen Diesel Fuel Biocide

March 1 – May 31, 2025

The Power Service 2025 Spring Fleet/Fuel Marketer Rebate offers digital gift cards for purchasing Diesel Kleen +Cetane Boost, Clear-Diesel Fuel & Tank Cleaner and Bio Kleen Diesel Fuel Biocide in cases of 1 gallon containers, 2.5 gallon containers, 55 gallon drums and 260 gallon totes from an authorized Power Service Warehouse Distributor.

This offer is valid for purchases from March 1 through May 31, 2025.

Please make sure to do the following:

- Complete the attached claim form, which summarizes the date of purchase, invoice number, part numbers purchased, total 1 gal cases, 2.5 gal cases, 55 gal drums or 260 gal totes purchased and total claim amount.
- 2. Attach proof of performance to the claim form. Proof of performance should include:
 - Copies of original invoices from an authorized Power Service Warehouse Distributor showing date and quantity purchased.
- 3. Claims must be submitted to Power Service Products and postmarked no later than **July 31, 2025**.
- 4. Form must include an email address.

Please contact Power Service for more details.

Submit Claim To:

Power Service – Spring Rebate 513 Peaster Hwy P.O. Box 1089 Weatherford, TX 76086-1089 800-643-9089

Form # RB01-2025

Power Service reserves the right to deny claims that were found to be fraudulent after audited.

POWER SERVICE PRODUCTS, INC.

Spring Fleet/Fuel Marketer Rebate Claim Form

Diesel Kleen +Cetane Boost & Clear-Diesel Fuel & Tank Cleaner	Bio Kleen Diesel Fuel Biocide
 1 Gal Container\$5 per case 	 1 Gal Container\$20 per case
2.5 Gal Container\$15 per case	
 55 Gal Drum\$100 per drum 	
 260 Gal Tote\$400 per tote 	

DATE OF PURCHASE	INVOICE NUMBER	PART NUMBER PURCHASED	TOTAL 1 GAL CASES PURCHASED	TOTAL 2.5 GAL CASES PURCHASED	TOTAL DRUMS PURCHASED	TOTAL TOTES PURCHASED
		TOTAL (x \$5, \$15, \$20, \$100 or \$400)				
of the page	lines at the top to calculate rebate	TOTAL CLAIM AMOUNT				

Rebate Redemption Information:						
COMPANY NAME (required - rebates will not be issued to an individual)						
ADDRESS (required)						
CITY, STATE, ZIP (required)						
FMAIL ADDRESS (required)	PHONE NUMBER					

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