



CLAIM FORM

Claim Form RB02-2025

2025 Fall Fleet/Fuel Marketer Gift Card Promotion

Diesel Fuel Supplement +Cetane Boost and Arctic Express Diesel Fuel Antigels

July 1 – November 30, 2025

The Power Service 2025 Fall Fleet/Fuel Marketer Gift Card Promotion offers several options of gift cards for purchasing Diesel Fuel Supplement +Cetane Boost and Arctic Express Diesel Fuel Antigels 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 July 1 through November 30, 2025.**

Please make sure to do the following:

1. 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. Form must include an email address. Claims must be submitted to Power Service Products and postmarked no later than **December 31, 2025.**
4. Once claim is approved, an email will be sent with instructions on how to claim the gift card.

Please contact Power Service for more details.

Submit Claim To:

Power Service – Fall Gift Card
513 Peaster Hwy
P.O. Box 1089
Weatherford, TX 76086-1089
800-643-9089

POWER SERVICE PRODUCT RESERVES THE RIGHT TO AUDIT AND/OR REQUEST INVOICE COPIES FOR ANY CLAIMS SUBMITTED. WE RESERVE THE RIGHT TO DENY CLAIMS THAT WERE FOUND TO BE FRAUDULENT AFTER AUDITED.

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Fall Fleet/Fuel Marketer Promotion

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Diesel Fuel Supplement +Cetane Boost

1 Gal Container.....\$5 per case
 2.5 Gal Container.....\$10 per case
 55 Gal Drum.....\$100 per drum
 260 Gal Tote.....\$400 per tote

Arctic Express Diesel Fuel Antigal:

2.5 Gal Container.....\$5 per case
 55 Gal Drum.....\$50 per drum
 260 Gal Tote.....\$200 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, \$10, \$50, \$100, \$200, \$400)				
Follow guidelines at top of page to determine award amount		TOTAL CLAIM AMOUNT				

Redemption Information:

COMPANY NAME (required)

PHONE NUMBER (required)

ADDRESS (required)

CITY, STATE, ZIP (required)

EMAIL ADDRESS (required)

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