

REBATE GUIDELINES

Rebate Claim Form RB02-2019

2020 Fall Fleet/Fuel Marketer Rebate Promotion

The Power Service 2020 Fall Fleet/Fuel Marketer Rebate Promotion offers you cash back for purchasing Diesel Fuel Supplement +Cetane Boost and Arctic Express Diesel Fuel Antigel 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 15 through November 30, 2020.

To ensure proper reimbursement from Power Service Products, please use the following guidelines:

- Complete the attached claim form, which summarizes the date of purchase, invoice number, part numbers purchased, total1 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 **December 31, 2020**.
- 4. Reimbursement will be made by check.
- 5. Rebates will **NOT** be paid to authorized Power Service warehouse distributors.
- 6. Submit claims to:

Power Service Fleet/Fuel Marketer Rebate PO Box 1089 513 West 4th St Weatherford, TX 76086

POWER SERVICE PRODUCTS

Rebate Claim Form RB02-2020

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....\$300 per tote

Arctic Express Diesel Fuel Antigel:

2.5 Gal Container......\$5 per case 55 Gal Drum.....\$50 per drum 260 Gal Tote.....\$150 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
		Diesel Fuel				
		Supplement				
		TOTAL (x \$5, \$10, \$100 or				
		\$300)				
		Arctic Express				
Follow guidelines at the top		TOTAL (x \$5, \$50, or \$150) TOTAL CLAIM				
of the page to calculate		AMOUNT (Add Diesel Fuel				
cash rebate		Supplement & Arctic Express Totals)				

Make Checks Payable to:

COMPANY NAME (checks will not be made to in an individual)

ADDRESS

CITY, STATE, ZIP

SIGNATURE PHONE NUMBER

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.

Form # RB02-2020