





Eligible Product Platforms						



OPERATOR INFORMATION

All fields required

Check Here: O Yes	s, I am a K-12 Foodservice Operator or USDA Child
School District Name	
Contact Title	
Mailing Address	
P.O. BOX (no P.O. Box unless a physical address is provided)	(ed above)
City	State Zip
Phone	
Email Address	To receive additional offers and communications from General Mills Foodservice.
Co-op/Buying Group/GPO	
DSR Name	

CALCULATE YOUR REBAT	CALCII	I ATE		DER	ΔTΕ
	CALCO	LAIL	IOUI	IZEDI	71 L

Product Type	# of cases	\$ per ca	ase Total	
		Х	=	
		Х	=	
		х	=	
Total Cases =		Total Rebate =		
	(20 case minimum 500 case maximum)		(\$1,500 maximum)	

TO RECEIVE YOUR REBATE











