

Thank you for your interest in the Manufacturer Rebate Program!



Date:

Customer:

We have received your notification of interest in the Pennsylvania Restaurant & Lodging Association (PRLA) manufacturer rebate program administered through Prime Source Purchasing (PSP). We are confident that this program would be beneficial to you.

This packet contains all the materials you will need to enroll in the program, including the following:

- **ENROLLMENT FORM/AGREEMENT**
Please complete all sections, including your current distributors' contact information, sign and date.
- **AUTHORIZATION LETTER NEEDED TO PROVIDE TO DISTRIBUTORS AND MANUFACTURERS**
Please supply the information requested at the bottom of the letter, including signature and date.

Simply complete above documents and return them to Prime Source Purchasing, Inc. (PSP):

Prime Source Purchasing, Inc.
Attention: Kristen Menniti
201 West Passaic Street
Rochelle Park, NJ 07662

Phone: (201) 968-5505
Fax: (201) 968-5515
Email: kmenniti@primesourcepurchasing.com

Note – we will request information and collect rebate dollars on all 1st quarter (2022) purchases if your enrollment forms are completed and submitted by 3/31/2022.

We look forward to helping you save money on the items you currently purchase. If you have specific questions about the program, please contact Kristen Menniti at (201) 968-5505 ext. 208.

Best regards,

A handwritten signature in black ink that reads 'Christine Preuss'.

Christine Preuss
Pennsylvania Restaurant & Lodging Association
Director of Member Services

A handwritten signature in purple ink that reads 'Kristen D. Menniti'.

Kristen Menniti
Prime Source Purchasing Inc.
Marketing & Sales Director



Manufacturer Rebate Program Enrollment Form

CLIENT INFORMATION

Business Name, # Units, Address, City, State, Zip, Location Phone, Fax, Contact Name, Title, Email Address, Cell

**All payee information will be set to the business name and checks mailed to the business address. Should you wish to make any further changes to your payee information please do so in the Payment Information section below. **

PAYMENT INFORMATION

Business Name on Check, Check Mailing Address, Payee Contact, Payee Email

DISTRIBUTOR INFORMATION

Distributor Name, City, State, Customer #, Sales Rep, Sales Rep Cell, Sales Rep Email

Distributor Name, City, State, Customer #, Sales Rep, Sales Rep Cell, Sales Rep Email

OTHER INFORMATION

Fountain Soda Type (Coke/Pepsi/Other - Please Specify), Liquor License (Y/N), Seasonal (Y/N)

BUYING GROUP AFFILIATION

Are you affiliated with a buying group? If so, please provide the details.

MANUFACTURER PROGRAM INFORMATION

Please provide names of any current manufacturer or distributor programs in which you participate (attach copies of all current programs to this form).

AGREEMENT

By checking this box the client acknowledges and agrees to all the terms and conditions of the PSP Member Enrollment Agreement.

Signature, Date

Signature is required.



My operation has retained Prime Source Purchasing Inc. (PSP) to coordinate our manufacturer programs, develop relationships with key manufacturers and strengthen the alliance with our distribution network by supporting more of our vendor partner brands and products.

I am asking our distributors to provide PSP with our usage information which will allow us to participate in the manufacturer programs that PSP creates on our behalf.

I am asking our manufacturer partners to direct all correspondence, communication and payment remittance to PSP since it will be assisting us with the implementation and execution of all manufacturer programs.

This letter also serves as confirmation that Prime Source Purchasing is our sole negotiator and administrator for all of our manufacturer programs. Our operation is not a member of nor participates in any other buying groups or programs. I hereby authorize the immediate termination of any other affiliation that may be in place.

Thank you for your assistance. Your cooperation and support of PSP's efforts is greatly appreciated.

Please contact Prime Source Purchasing with any questions:

PRIME SOURCE PURCHASING, INC.

Attention: Kristen Menniti

201 West Passaic Street, Suite 406

Rochelle Park, NJ 07662

Phone: 201.968.5505

Fax: 201.968.5515

Email: kmenniti@primesourcepurchasing.com

Sincerely,

Name: _____

Title: _____

Business Name: _____

Date: _____

Client Signature Required _____

cc: Kristen Menniti - Marketing & Sales Director, Prime Source Purchasing Inc.