

OPERATOR



SEPTEMBER 28 THOUGH DECEMBER 31, 2023

ITEM CODE	PRODUCT DESCRIPTION	\$/CS	CASES	TOTAL
01748	90070247128600 SMITHFIELD BONELESS ROUND HAM, SILVER MEDAL, WATER ADDED, 2/13 LB, RANDOM WEIGHT	\$2.00		
88481	90070247195558 SMITHFIELD CARVEMASTER APPLEWOOD HAM WITH NATURAL JUICES, GOLD MEDAL, 2/7.65 LB, RANDOM WEIGHT	\$2.00		
88488	90070247128594 SMITHFIELD ORIGINAL PIT HAM, SILVER MEDAL, SMOKED, 2/14 LB, RANDOM WEIGHT	\$2.00		
	90070247126415 SMITHFIELD HONEY & BROWN SUGAR PIT HAM, SILVER MEDAL, 2/16 LB, RANDOM WEIGHT	\$2.00		
	90070247127535 SMITHFIELD PIT HAM, BRONZE MEDAL, HAM AND WATER PRODUCT, 2/15.65 LB, RANDOM WEIGHT	\$2.00		
	90070247191727 SMITHFIELD HAM WITH NATURAL JUICES, GOLD MEDAL, BONELESS SMOKED, 2/9.2 LB, RANDOM WEIGHT	\$2.00		
88479	90070247128419 SMITHFIELD BONELESS FLAT HAM, SILVER MEDAL, SMOKED, WATER ADDED, 2/10 LB, RANDOM WEIGHT	\$2.00		

OPERATORS SAVE UP TO \$250!

REDEEM THIS REBATE IN 10 MINUTES OR LESS! SUBMIT ALL THE FORMS ONLINE VIA RAPIDREBATE.NET!



STEP 1

Log on to
RapidRebate.net



STEP 2

Add product info
& upload invoices



STEP 3

Submit &
check status

INSTRUCTIONS FOR SUBMITTING THIS REBATE:

- Use the grids on the front and back of this page to indicate the number of cases of each product code purchased during the eligible period.
- Put the total number of cases purchased in the box below.
- Put the total \$ amount of the requested rebate in the box below.
- Complete the contact info (below) and segment info (right) and mail the form, along with required printout/invoice copies, to the address at right.

Terms and Conditions:
Offer limited to foodservice operators only. Chain operators must participate as single units. Contracted chain and bid accounts cannot participate. This coupon may be redeemed for a minimum of \$20 up to \$250 per individual foodservice operator. Submit this rebate with copies of distributor invoices or distributor printouts verifying valid products were purchased between September 28–December 31, 2023. DISTRIBUTOR PRINTOUTS OR INVOICES MUST INCLUDE THE FOLLOWING OPERATOR INFORMATION: Operator Name, Product Purchased, Number of Cases Purchased, Date the Product was Purchased, Invoice Number and Physical Address. Operators must fill out rebate coupon themselves. Distributor tracking reports do not qualify. Bulk redemptions by distributors and/or DSRs are not allowed. Request must be postmarked no later than February 10, 2024. Offer not redeemable in conjunction with any other offer. Operators may submit more than once until the maximum dollar amount is met; however, the initial submission must meet the minimum requirement of \$20. Allow 10–12 weeks for delivery. Incomplete or incorrect submissions will delay payment. Void where restricted, prohibited or banned.

MAXIMUM PAYOUT IS \$250 / MINIMUM PAYOUT IS \$20

# of \$2 CS:	X \$2.00/CS:	= Total \$:
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CHECK WILL BE MAILED TO THE ADDRESS SHOWN BELOW (PLEASE PRINT)

OPERATION NAME:		CONTACT NAME:
E-MAIL ADDRESS:		
OPERATION ADDRESS:		
CITY:	STATE:	ZIP:
TELEPHONE NUMBER:	FAX NUMBER:	
DISTRIBUTOR:	DSR NAME:	

YOU CAN ALSO SUBMIT OFFER FORM AND COPIES OF INVOICES ONLINE AT WWW.RAPIDREBATE.NET
FOR MORE INFORMATION ON SMITHFIELD CULINARY PRODUCTS, PROMOTIONS, RECIPES OR MARKETING MATERIALS,
CONTACT YOUR SMITHFIELD CULINARY REPRESENTATIVE/BROKER OR CALL 1-888-327-6526 WWW.SMITHFIELDCULINARY.COM

PLEASE MAIL THIS COUPON WITH COPIES OF
DISTRIBUTOR INVOICES TO:

SMITHFIELD CULINARY
2023 HOLIDAY HAM COUPON REDEMPTION
PO BOX 552
TRAVERSE CITY, MI 49685

REBATE QUESTIONS? CALL 1-877-570-5504



NOW SUBMIT YOUR
REBATES ONLINE AT
WWW.RAPIDREBATE.NET

COUPON CODE: HHOPR23

PLEASE CHECK THE MARKET SEGMENT YOUR OPERATION/TYPE OF RESTAURANT
BELONGS IN:

Are you a new Smithfield Culinary customer
or a current Smithfield Culinary customer

COMMERCIAL

- Full Service
 Casual Theme
 Family
 Upscale/Fine Dining
 C-Store
 Hotel/Motel/Resort

OWNERSHIP

- Independent
 Local/Regional Chain
 National Chain

NON-COMMERCIAL

- College/University
 Elementary/Secondary School
 Business & Industry
 Recreational/Entertainment
 Transportation Foodservice
 Military/Correctional

OWNERSHIP

- Contract Management
 Self-Operated

Number of meals served per day:

_____ Breakfast _____ Lunch _____ Dinner

Approximate dollar volume annual food/beverage purchases: _____