



It's a Beautiful Day for Savings!

ACT NOW! OFFER ENDS DECEMBER 31, 2020

TRY UDI'S® FOR FREE!

Buy one case of eligible Udi's® product and receive a rebate for the purchase price*!

Udi's® is the #1-selling dedicated gluten-free baked goods brand in the US¹, offering great taste and pleasing texture for a wide variety of menu options any time of day. Many products are dairy, soy, and nut free too! With Udi's® as your partner, setting up your operation to sell gluten-free items is a snap – ask your Conagra sales representative to find out how.

Udi's® is always gluten free and delight full – try it today!

This offer is valid only on the following Udi's® products:

Blueberry Muffin IW 36 ct. 9899780645 63646	French Classic Dinner Roll IW 36 ct. 9899780706
Double Chocolate Muffin IW 36 ct. 9899780646 60187	12" Classic Hoagie Roll IW 12 ct. 9899780702 61760
Chocolate Chip Cookie IW 36 ct. 9899780665 62267	Classic Hot Dog Bun IW 24 ct. 9899780620 62589
Snickerdoodle Cookie IW 36 ct. 9899780687	Classic Hamburger Bun IW 24 ct. 9899780644 62346
Soft White Sandwich Bread 6 ct. 9899780901 62408	Small Classic Hamburger Bun IW 24 ct. 9899780705
Multigrain Sandwich Bread 6 ct. 9899780902 62389	12" Pizza Crust Par-Baked 2/10 ct. 9899780635
Plain Bagel IW 24 ct. 9899780660 62372	10" Pizza Crust Par-Baked 2/10 ct. 9899780643 62152
Whole Grain Seeded Dinner Roll IW 36 ct. 9899780676	Extra Large Plain Tortilla 4/10 ct. 9899780787



- ✓ Certified Gluten-Free
- ✓ No Soy Ingredients
- ✓ No Dairy Ingredients
- ✓ Kosher Parve

INSTRUCTIONS

- *MAXIMUM REBATE OF \$50.00/1 FREE CASE PER CUSTOMER.
- Purchase one case of Udi's® product from the approved list above between April 1 and December 31, 2020. Rebate submissions must be postmarked by January 31, 2021.
- Complete and send this form along with your distributor invoice or clear copy as proof of purchase (circle product and price paid – do not highlight) to the following address. Operator name and address must appear on the distributor invoice. Illegible copies of proof of performance will be rejected.

Udi's Free Case Rebate
PO Box 2025 - FS-2453, Brownsdale, MN 55918

Or for express 2-4 week processing, simply upload your distributor proof of purchase to:

fspromos4u.com/conagra
Access Code: Udis2020

Chains must participate on an individual outlet basis. This offer cannot be combined with other rebates, allowances, contracted or bid business or used to redeem against other rebate offers. Offer invalid for resale, cash/carry and club stores. Cases redeemed against this offer may not be used to redeem against any other rebate offers. Partial cases not accepted. Rebates cannot be assigned or transferred. Offer valid for foodservice operators only; suppliers or distributors cannot redeem rebates for operators. We reserve the right to audit requests for payment and reserve the right to cancel this offer at any time. This rebate may be mechanically reproduced or photocopied but not altered from its original format. All rebates must be postmarked by January 31, 2021. VOID IF RESTRICTED OR PROHIBITED BY LAW.

Reference number: FS-2453

800-357-6543 or
www.conagrafoodservice.com

¹2019 IRI Data
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TO RECEIVE YOUR REBATE COMPLETE THE FORM BELOW IN FULL.



I have purchased a case of qualifying Udi's® product and have attached my distributor invoice as proof of purchase. Please send me my rebate!

NAME _____

TITLE _____

ORGANIZATION _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ EMAIL ADDRESS _____

SIGNATURE _____

YES! INCLUDE ME ON EMAIL OFFERS FROM CONAGRA FOODSERVICE.

1. My foodservice operation can best be described as:

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> Hospital | <input type="checkbox"/> Long-Term Care | <input type="checkbox"/> K-12 School | <input type="checkbox"/> Business Dining |
| <input type="checkbox"/> Casual Dining | <input type="checkbox"/> Family Dining | <input type="checkbox"/> Bar/Tavern | <input type="checkbox"/> Recreation/Entertainment |
| <input type="checkbox"/> Convenience Store | <input type="checkbox"/> Catering | <input type="checkbox"/> College/University | <input type="checkbox"/> Sandwich/Bakery Café |
| <input type="checkbox"/> QSR | <input type="checkbox"/> Other (specify): _____ | | |

2. Dayparts served (check all that apply): Breakfast Lunch Dinner Snacks/Takeout

3. Number of Units (if applicable): _____

4. Annual sales at this location:
 \$0 - \$499,999 \$500,000 - \$749,999 \$750,000 - \$999,999 Over \$1,000,000

5. I currently have the following number of designated gluten-free items on my menu:
 0-5 6-10 11-15 Over 15

6. I plan to purchase the following gluten-free baked goods in the next 30 days:
 Breads/rolls Pizza crusts Hot dog/hamburger buns Tortillas/wraps
 Bagels Muffins/cakes Cookies Other (specify): _____

7. I have purchased other gluten-free baked goods brands in the past 30 days:
 Yes No If yes, please specify brand(s): _____