

Operator Rebate

October 4, 2021–January 2, 2022

ITEM CODE	PRODUCT DESCRIPTION	\$/CS	CASES	TOTAL
Smoked Boneless Ham				
90070100047833	SMITHFIELD HAM, GOLD MEDAL, WATER ADDED, 2/11.5 LB, RANDOM WEIGHT	\$2.00		
90027815307219	SMITHFIELD HAM, GOLD MEDAL, HEALTHY ONES, 2/7.25 LB, RANDOM WEIGHT	\$2.00		
90070247128600	SMITHFIELD BONELESS ROUND HAM, SILVER MEDAL, WATER ADDED, 2/13 LB, RANDOM WEIGHT	\$2.00		
90070247128419	SMITHFIELD BONELESS FLAT HAM, SILVER MEDAL, SMOKED, WATER ADDED, 2/10 LB, RANDOM WEIGHT	\$2.00		
90070247195558	SMITHFIELD CARVEMASTER APPLEWOOD HAM WITH NATURAL JUICES, GOLD MEDAL, 2/7.65 LB, RANDOM WEIGHT	\$2.00		
90070247128594	SMITHFIELD ORIGINAL PIT HAM, SILVER MEDAL, SMOKED, 2/14 LB, RANDOM WEIGHT	\$2.00		
90070247155941	SMITHFIELD SMOKED HAM, GOLD MEDAL, 96% FAT FREE, HAM & WATER PRODUCT, 2/10 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		
90070247128419	SMITHFIELD BONELESS FLAT HAM, SILVER MEDAL, SMOKED, WATER ADDED, 2/10 LB, RANDOM WEIGHT	\$2.00		
90070247128594	SMITHFIELD ORIGINAL PIT HAM, SILVER MEDAL, SMOKED, 2/14 LB, RANDOM WEIGHT	\$2.00		
90070247191727	SMITHFIELD HAM WITH NATURAL JUICES, GOLD MEDAL, BONELESS SMOKED, 2/9.2 LB, RANDOM WEIGHT	\$2.00		
90070247190478	SMITHFIELD ROUND HAM, BRONZE MEDAL SMOKED, HAM AND WATER PRODUCT, 2/9 LB, RANDOM WEIGHT	\$2.00		
90070247127054	SMITHFIELD CANADIAN HAM, GOLD MEDAL, 95% FAT FREE, 4/3.85 LB, RANDOM WEIGHT	\$2.00		
Spiral and Bone-In Ham				
90070800028170	SMITHFIELD HICKORY SPIRAL HAM, BONE-IN, PREMIUM, WITH GLAZE, 4PC	\$2.00		
90070247181414	SMITHFIELD BONE-IN SMOKED HAM STEAK, WATER ADDED, 12/1.30 LB STEAKS, RANDOM WEIGHT	\$2.00		
90070247195626	SMITHFIELD HICKORY BONE IN SPIRAL HAM, 14-18 SLICES, 2/15 LB, RANDOM WEIGHT	\$2.00		

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:

1	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.
2	Put the total number of cases purchased in the box below.
3	Put the total \$ amount of the requested rebate in the box below.
4	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 October 4, 2021–January 2, 2022. 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 12, 2022. 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.

PLEASE MAIL THIS COUPON WITH COPIES OF DISTRIBUTOR INVOICES TO:

SMITHFIELD CULINARY
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: HHOPR21

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

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

- OWNERSHIP**
- Independent
 - Local/Regional Chain
 - National Chain

- OWNERSHIP**
- Contract Management
 - Self-Operated

Number of meals served per day:
Breakfast _____ Lunch _____ Dinner _____

Approximate dollar volume annual food/beverage purchases: _____

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/SMITHFIELD