

# 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 2nd quarter (2019) purchases if your enrollment forms are completed and submitted by 6/30/19.**

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  
Member Services Manager

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



Prime Source Purchasing, Inc.  
"WE MAKE PARTNERSHIPS REWARDING"

## CLIENT INFORMATION

Business Name \_\_\_\_\_ # Units \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Contact Name \_\_\_\_\_ Title \_\_\_\_\_  
Email Address \_\_\_\_\_

## DISTRIBUTOR INFORMATION

Distributor Name _____	Distributor Name _____
Division Location _____	Division Location _____
City/State _____	City/State _____
Customer # _____	Customer # _____
Sales Rep _____	Sales Rep _____
Sales Rep Phone _____	Sales Rep Phone _____
Distributor Name _____	Distributor Name _____
Division Location _____	Division Location _____
City/State _____	City/State _____
Customer # _____	Customer # _____
Sales Rep _____	Sales Rep _____
Sales Rep Phone _____	Sales Rep Phone _____

## BUYING GROUP AFFILIATION

Are you affiliated with any other 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](mailto:kmenniti@primesourcepurchasing.com)

Sincerely,

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Business Name: \_\_\_\_\_

Date: \_\_\_\_\_

**Client Signature Required** \_\_\_\_\_

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