



## MARKETING REQUEST FORM: **MERCHANDISING & SAMPLES**

**Thank you for purchasing Beauflor merchandising! To show our appreciation, we would like to offer you 50% rebate to help cover your investment.\* Please fill out this form to request rebate.**

\* 50% rebate only applicable to full price merchandising/samples, and cannot exceed 2% of annual sales.

\* Credits will be applied semi-annually. January through June credit requests must be submitted by July 31st and will be processed by August 31st. July through December credits must be submitted by January 31st and will be processed by February 28th.

\* Customer is required to provide the following information along with a **copy of each invoice** to their Beauflor sales rep.

\* No credit requests will be processed if they do not fall into the allotted months for that semi-annual period or if required documentation is not included.

\* All submissions are subject to approval.

DATE: \_\_\_\_\_

CUSTOMER EMAIL: \_\_\_\_\_

CUSTOMER: \_\_\_\_\_

BEAUFLOR SALES REP: \_\_\_\_\_

CUSTOMER PHONE: \_\_\_\_\_

BEAUFLOR ACCOUNT #: \_\_\_\_\_

### MERCHANDISING/SAMPLES 50% REBATE

MERCH/SAMPLE NAME: \_\_\_\_\_

QTY: \_\_\_\_\_ TOTAL COST: \_\_\_\_\_

INVOICE DATE: \_\_\_\_\_

INVOICE #: \_\_\_\_\_

MERCH/SAMPLE NAME: \_\_\_\_\_

QTY: \_\_\_\_\_ TOTAL COST: \_\_\_\_\_

INVOICE DATE: \_\_\_\_\_

INVOICE #: \_\_\_\_\_

MERCH/SAMPLE NAME: \_\_\_\_\_

QTY: \_\_\_\_\_ TOTAL COST: \_\_\_\_\_

INVOICE DATE: \_\_\_\_\_

INVOICE #: \_\_\_\_\_

MERCH/SAMPLE NAME: \_\_\_\_\_

QTY: \_\_\_\_\_ TOTAL COST: \_\_\_\_\_

INVOICE DATE: \_\_\_\_\_

INVOICE #: \_\_\_\_\_

MERCH/SAMPLE NAME: \_\_\_\_\_

QTY: \_\_\_\_\_ TOTAL COST: \_\_\_\_\_

INVOICE DATE: \_\_\_\_\_

INVOICE #: \_\_\_\_\_

- Use multiple pages if needed. Invoice must be dated within 6 months of submission date.
- If you have questions or concerns surrounding your request, please contact your Beauflor sales rep.