

2011 Phylrich® Suite Incentives Showroom Consultant Program

CLAIM FORM

Showroom Consultant: _____ Phylrich Suite Incentives
 Consultant Program Account Number: _____

Please fill in the total dollar amount earned for each product category.

Invoice Number	PRODUCT INFORMATION				Total \$ Earned	END USER INFORMATION	
	K-Series lavatory faucet \$15	Tub Set \$15	Shower valve \$15	D-Series faucet \$5		Name/Address/Phone Number/e-mail	Price sold for each product
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							

You must attach copies of invoices to receive full credit. Return all forms to:
 Phylrich Promotion, c/o MarketNet, 553 N. North Court, Suite 110, Palatine, IL 60067.
 If you prefer, fax all completed forms to: 866-500-2532; or email all forms to
 admin@phylrichrewards.com Please visit www.phylrichrewards.com for current program details.

Grand Total*

* If your grand total is \$600 or more, please visit
 www.phylrichrewards.com to download a W-9 form. Please note
 your check will NOT be issued until we receive your W-9 form.