

BUY ONE GET ONE

AJINOMOTO WINDSOR



Golden Tiger®

Code	Description	Pack	Each (oz.)	Quantity per Case*	Net Weight (lbs.)	Yield per lb. after boiling
GOLDEN TIGER POTSTICKERS						
52599	CHICKEN POTSTICKER	4/30 CT BAGS	1	120	7.5	
52944	PORK POTSTICKER	4/30 CT C&C BOX	1	120	7.5	
52955	MINI PORK POTSTICKER	8/50 CT BAGS	.33	400	8.3	
52956	MINI CHICKEN POTSTICKER	8/50 CT BAGS	.33	400	8.3	
53014	SPICY BREADED PORK POTSTICKER	4/40 CT BAGS	.88	160	8.8	
53017	PORK POTSTICKER	4/30 CT BAGS	1	120	7.5	
54008	PORK POTSTICKER	4/50 CT BAGS	.7	200	8.8	
54009	VEGETABLE POTSTICKER	4/50 CT BAGS	.7	200	8.8	
54791	HOT AND SPICY VEGETABLE POTSTICKER	4/30 CT BAGS	1	120	7.5	
56228	GOURMET VEGETABLE POTSTICKER	4/30 CT BAGS	1	120	7.5	
AMOY POTSTICKERS						
03051	THAI VEGETABLE POTSTICKER	10/12 CT TRAYS	.7	120	5.3	
04153	VEGETABLE POTSTICKER	6/30 CT BAGS	1	180	11.3	
04173	TURKEY POTSTICKER	6/30 CT BAGS	1	180	11.3	
04213	ONE BITE VEGETABLE POTSTICKER	6/50 CT BAGS	.6	300	11.3	
04223	SHRIMP POTSTICKER	4/30 CT BAGS	1	120	7.5	
04597	PORK POTSTICKER	6/30 CT BAGS	1	180	11.3	
07250	PEKING DUCK POTSTICKER	10/12 CT TRAYS	.67	120	5.0	
07251	GOURMET CHICKEN POTSTICKER	10/12 CT TRAYS	.67	120	5.0	
07252	GOURMET PORK POTSTICKER	10/12 CT TRAYS	.67	120	5.0	
AMOY NOODLES						
06101	CHOW MEIN NOODLES	4/5 LB BAGS	80	4	20	27.5 OZ.
06103	JAPANESE UDON NOODLES	4/5 LB BAGS	80	4	20	20.0 OZ.
06104	LO MEIN NOODLES	4/5 LB BAGS	80	4	20	24.0 OZ.
06105	SOBA (BUCKWHEAT) NOODLES	4/5 LB BAGS	80	4	20	27.0 OZ.
06106	HAKKA NOODLES	4/5 LB BAGS	80	4	20	29.5 OZ.
06108	YAKI-SOBA NOODLES	4/5 LB BAGS	80	4	20	27.5 OZ.
06109	RICE NOODLES	12/12 OZ. BAGS	12	12	9	N/A
06112	WHOLE WHEAT NOODLES	4/5 LB BAGS	80	4	20	27.0 OZ.
06113	JAPANESE RAMEN NOODLES	12/4CT BAGS	4.4	48	13.2	26.5 OZ.
06114	CHOW MEIN NOODLES (TURMERIC COLORED)	4/5 LB BAGS	80	4	20	27.5 OZ.

*Approximate

Purchase up to six cases and get up to three of those cases FREE!

Purchase must be made between April 1, 2016 - December 31, 2016.

This offer is valid on new business only. New business is defined as not having purchased the SKU in question within the past year.

of Different SKUs _____ / Rebate/Case \$ _____

Total # cases ordered _____ / Total amount due = \$ _____

MAX REBATE VALUE \$250.

☐ YES! I would like more information. Please have my representative contact me.

*Operation or Establishment Name _____

*Address _____

*City _____ *State _____ *Zip _____

*Phone _____ E-Mail _____

*Preferred Distributor _____ *Required information

IMPORTANT

SEND TO: Coupon Processing Center
1007 South Melrose Street
Placentia, CA 92870
• Attention: Rod Turner

Attach copies of invoices showing qualified purchases when sending in this qualification form. Rebate will be mailed to you after receipt of proof of purchase. Offer valid from April 1, 2016 through December 31, 2016. Must be postmarked by January 31, 2017.

Place label here with Sales Rep Name, Broker Name, Address, Phone Number

TYPE OF ESTABLISHMENT (check one)

- | | | | |
|--|---|--|--|
| <input type="radio"/> Caterer | <input type="radio"/> Retail Store | <input type="radio"/> Cafeteria | <input type="radio"/> Nursing Home/Care Facility |
| <input type="radio"/> Convenience Stores | <input type="radio"/> Bakery Store | <input type="radio"/> Ethnic/Theme/Specialty Rest. | <input type="radio"/> Schools (K-12) |
| <input type="radio"/> Deli | <input type="radio"/> Specialty Coffee Shops | <input type="radio"/> College/University | <input type="radio"/> School District (K-12) |
| <input type="radio"/> Drinking Places | <input type="radio"/> Family/Casual Dining | <input type="radio"/> Correctional Institution | <input type="radio"/> Vending |
| <input type="radio"/> Hotel/Motel | <input type="radio"/> Fine Dining/Dinner House | <input type="radio"/> Employee Feeder (B&I) | <input type="radio"/> Other Food Service |
| <input type="radio"/> Recreation/Entertainment | <input type="radio"/> Fast Food (Quick Service) | <input type="radio"/> Hospital | |

☐ I am directly responsible for food purchasing. ☐ I will make a recommendation to the person who is directly responsible for purchasing.

KEY CONCEPT OR THEME (check one)

- | | |
|-----------------------------------|--|
| <input type="radio"/> Mexican | <input type="radio"/> Traditional American |
| <input type="radio"/> Italian | <input type="radio"/> Seafood |
| <input type="radio"/> Steak House | <input type="radio"/> Other _____ |
| <input type="radio"/> Pizza | |
| <input type="radio"/> Asian | |

Terms and Conditions: Projected rebate amount based on product availability. We reserve the right to limit quantities and correct printing errors. Not valid with any other distributor promotion. Rebate request must be accompanied with invoices; no hand-written invoices will be accepted as proof of purchase. Distributors do not qualify as foodservice operators. Offer void where prohibited. In accordance with the Safe Harbor Regulations under the Medicare/Medicaid Anti-Fraud and Abuse Law, you must report discounts, in the form of allowances or rebates in the applicable cost report denoting a reduction in your food costs. Maximum redemption value per coupon \$250.00. Offer good only on those products purchased between April 1, 2016 - December 31, 2016. Must be postmarked by January 31, 2017.