



Customer Information

Full Name: _____

Mailing Address: _____

City: _____ Province/State: _____

Postal/Zip Code: _____

Phone: _____ Email: _____

Product Information

Claim Date: _____

Dealer Name: _____ Dealer City: _____

Product Rebate #1

Product Name: _____

Claim Amount: _____ Serial Number: _____

Date Equipment Delivered to Customer: _____

Product Rebate #2

Product Name: _____

Claim Amount: _____ Serial Number: _____

Date Equipment Delivered to Customer: _____

Product Rebate #3

Product Name: _____

Claim Amount: _____ Serial Number: _____

Date Equipment Delivered to Customer: _____

Product Rebate #4

Product Name: _____

Claim Amount: _____ Serial Number: _____

Date Equipment Delivered to Customer: _____

Product Rebate #5

Product Name: _____

Claim Amount: _____ Serial Number: _____

Date Equipment Delivered to Customer: _____

Please email completed form along with copies of invoice and proof of delivery to cashback@meridianmfg.com Rebates must be submitted on or before March 15, 2025.