



SPIFF CLAIM FORM

Program Dates: January 1, 2025 through June 30, 2025!

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

Bliss Package	\$125	MX4-6 Residential Generator	\$50
Bliss Linear Package	\$135	MSSUPER1E-3E Residential Generator	\$35
XDream Package	\$100	MS90E-400E Residential Generator	\$25
XDream Linear Package	\$110	CX Generator Package	\$40
XButler Package	\$25	CT Day Spa Package	\$25
XButler Linear Package	\$35	AromaFlo System	\$10
AirButler Package	\$20	AudioX System	\$10
AirButler Linear Package	\$30	ChromaSteamX System	\$10
Butler Package	\$20	ChromaX Duo	\$10
Butler Linear Package	\$30	Broadway/Metro/Tribeca Towel Warmer	\$10

Showroom
Consultant: _____

Consultant Program
Account Number: _____

Invoice Number	Product Sold (see above)	Units Sold	Reward \$ Earned (see above)
		Grand Total	

NOTE: The maximum time allowed to submit your invoices must be within 6 months from the invoice date.

Please send your claim form and invoices the following ways: e-mail: admin@mrsteamrewards.com, upload from the website, fax: 866-500-2532, or mail to: MarketNet Associates 553 N North Ct., Suite 110, Palatine IL 60067. You must attach copies of invoices with claim form to receive rewards. Please visit www.mrsteamrewards.com for current qualified products and program details. W9 forms must be completed and sent in prior to checks being issued. Please go to www.mrsteamrewards.com to download a W9 form. **Must be submitted within 6 months of sale.**