



APPLIANCES

**DELIVERY / INSTALL REBATE
ONLY 8/25/11 THROUGH 9/5/11**

Valid up-to 14 days from purchase date

114

1719

VALID ONLY AT SCHAEFER'S

Step 1 TO BE COMPLETED BY CUSTOMER

Purchase/Delivery Date: _____

Invoice Number: _____

Qualifying Purchases must be made 8/25/11 THROUGH 9/5/11

Delivery / Install:	Up To	Qualifying Purchase \$499 & Up	
<input type="checkbox"/> Whirlpool	\$50.00	<input type="checkbox"/> Sub Zero	\$50.00
<input type="checkbox"/> Maytag	\$50.00	<input type="checkbox"/> Wolf	\$50.00
<input type="checkbox"/> Amana	\$50.00	<input type="checkbox"/> Asko	\$50.00
<input type="checkbox"/> Jenn-Air	\$50.00	<input type="checkbox"/> Viking	\$50.00
<input type="checkbox"/> KitchenAid	\$50.00	<input type="checkbox"/> Miele	\$50.00
<input type="checkbox"/> Estate	\$50.00	<input type="checkbox"/> Fisher&Paykel	\$50.00
<input type="checkbox"/> Electrolux	\$50.00		
<input type="checkbox"/> Frigidaire	\$50.00	<i>Grills</i>	
		<input type="checkbox"/> BroilMaster	\$50.00
<input type="checkbox"/> LG	\$50.00	<input type="checkbox"/> Huntington	\$50.00
<input type="checkbox"/> Danby	\$50.00	<i>Other:</i>	
		<input type="checkbox"/> _____	\$50.00

Model #: _____

Serial #: _____

Model #: _____

Serial #: _____

Delivery / Install Amount: _____

**Invoice must include Delivery / Install Fee*

**May Not Combine with any other Delivery / Install Rebate*

Step 2 TO BE COMPLETED BY CONSUMER

Consumer Name: _____

Mailing Address: _____

City, State & Zip: _____

Phone Number: _____

E-Mail Address: _____

Step 3 CONSUMER REBATE INSTRUCTIONS

1. Mail the completed rebate certificate to the address below.
2. Include a legible copy of your sales receipt showing the purchase date, product model number, product serial number and all charges paid.
3. Eligible models must be purchased between 8/25/11 & 9/5/11
4. The envelope must be postmarked within 14 days of the purchase/delivery date shown on the sales receipt and shown above on this form.
5. Late submissions will not be accepted.
6. Omission of sales receipt or any other information will delay processing.

This offer is limited to **ONE REBATE FORM per household**. Void where prohibited, taxed, or restricted by law. If you do not receive your rebate after 12 weeks please call 1-509-734-7742 between 9AM & 5PM PST. The consumer is responsible for appropriate state sales tax. The consumer is solely responsible for lost, mutilated, or misdirected mail. If you receive a letter from us requesting more information, all responses must be made within 4 weeks of our request. By submitting this claim you hereby accept the above stated terms and conditions. Fraudulent submissions may result in federal prosecution.

Mail To:

NWW Processing Center
Program# WSCH-082511DELVA
8382 Gage Blvd Suite K
Kennewick, WA 99336