



Warners' Stelian  
Location ID  
#017800001

**\$100 Mail-In Rebate\***  
with the purchase of a qualifying  
**Electrolux Laundry pair**

from the list of eligible models below from a participating  
**Warners' Stelian** retailer between  
**September 23, 2017 and September 27, 2017**

**TO BE COMPLETED BY CONSUMER:**

**1. Fill out the following consumer information:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

E-mail: \_\_\_\_\_

**2. Write the model number(s) for each appliance purchased in the section below. (MUST BE COMPLETED TO QUALIFY)**

**3. Mail completed redemption form with model number(s) selected and a copy of your invoice/receipt to the address below.**

\* Invoice/receipt must show qualifying model(s), purchase price(s) and sale date.

Buy it now; Take it now, Consumer Mail-In Rebate. Sorry, No Special Orders. Special Orders DO NOT Qualify! Prior Sales DO NOT Qualify!

**ENVELOPES MUST BE POSTMARKED BY November 11, 2017.**

\* Allow 12 weeks from the time we receive all required information for the delivery of your rebate.

Please check here if you want to receive communications other than information concerning your rebate via e-mail.

**Yes, I purchased the qualifying appliance(s) to the right from a participating Warners' Stelian retailer between September 23, 2017 and September 27, 2017. (MUST BE CHECKED TO QUALIFY)**

**TO BE COMPLETED BY SALESPERSON AND MUST BE LEGIBLE FOR VALIDATION**

**4. Order #:** \_\_\_\_\_

**Salesperson:** \_\_\_\_\_

**5. Total expected rebate amount \$** \_\_\_\_\_

**6. Circle the model(s) purchased on the list to the right.**

**MAIL TO:** Laundry Pair Rebate  
Offer Code: WS0917001  
P.O. Box 421328  
Del Rio, TX 78842-1328

**\*REBATE TERMS & CONDITIONS:** Available to the consumer via mail-in redemption with the purchase of a qualifying item(s) from a participating Warners' Stelian retailer between September 23, 2017 and September 27, 2017. To receive your rebate, the consumer must submit the following information to the Inmar redemption center: (1.) The completed redemption form. (2.) A legible copy of an invoice/receipt showing date of sale, model numbers and purchase price(s) of all appliances purchased. All redemption requests must be postmarked by November 11, 2017. Please DO NOT USE tape, staples, or paper clips when mailing information. Model(s) purchased must be circled on this form in order to be eligible. Please complete all fields requesting information. Multiple sales to apartments, condominiums, subdivisions, wholesale sales, etc. do not qualify. Void where prohibited, taxed, or restricted by law. Missing, incomplete or incorrect information delays processing. Prior Sales Do Not Qualify! The consumer is responsible for appropriate state sales tax. The consumer is solely responsible for lost, damaged or misdirected mail. If you receive a letter requesting more information, all responses must be made within four weeks of our request. By submitting this claim you hereby accept the above stated terms and conditions. Fraudulent submissions may result in federal prosecution. Please allow 12 weeks for delivery of your rebate. Please visit [www.inmarrebates.com](http://www.inmarrebates.com) or call (866) 973-2970 Monday through Friday 8:00 a.m. – 6:00 p.m. EST to check the status of your rebate. Unless expressly prohibited by law, payee authorizes reasonable dormancy fees deducted if check not cashed within 180 days

**4. PLEASE LIST THE REQUIRED INFORMATION:** model number(s), serial number(s) and Purchase price(s) of the eligible item(s) purchased in the boxes below. Missing or incomplete information or late submission voids rebate offer. The written terms of this redemption form and consumer offer cannot be altered with any verbal agreements.

**INFORMATION MUST BE COMPLETED TO QUALIFY.**

Do NOT mail this rebate without the serial number(s) listed or this rebate will be denied.

| ITEM | MODEL NUMBER | SERIAL NUMBER | PURCHASE PRICE |
|------|--------------|---------------|----------------|
|      |              |               | \$             |
|      |              |               | \$             |

**5. PLEASE CIRCLE BELOW THE MODEL'S PURCHASED TO QUALIFY. MODELS MUST BE CIRCLED TO QUALIFY.**

*\*\*Must Purchase (1) Washer AND (1) Dryer to qualify*

**\$100 Laundry Pair**

| WASHER     |  | A<br>N<br>D | DRYER      |            |
|------------|--|-------------|------------|------------|
| FRONT LOAD |  |             | ELECTRIC   | GAS        |
| EFLS317TIW |  |             | EFDE317TIW | EFDG317TIW |
| EFLW417SIW |  |             | EFME417SIW | EFMG417SIW |
| EFLS517SIW |  |             | EFME517SIW | EFMG517SIW |
| EFLS517STT |  |             | EFME517STT | EFMG517STT |
| EFLS617SIW |  |             | EFME617SIW | EFMG617SIW |
| EFLS617STT |  |             | EFME617STT | EFMG617STT |

