

**IBM System x Express End User Hard Drive Cash Back Offer  
Request Form ZA09-1049**

To qualify for the rebate, this signed form along with all requested documentation must be received no later than 30 days after the invoice date, at:

IBM Express Claims, PO Box 3560, Maidenhead SL6 9YE, United Kingdom  
Email: info@express-claims.com

IBM will confirm receipt of your rebate request by email.

Qualifying IBM System x and Hard Disk Drives purchased:

Machine Type, Model: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Machine Serial Number: \_\_\_\_\_  
(if applicable) Part Number, Quantity, Invoice date  
\_\_\_\_\_  
\_\_\_\_\_

HDD Part No. claimed: \_\_\_\_\_  
(if applicable) Part Number, Quantity, Invoice date  
\_\_\_\_\_  
\_\_\_\_\_

Total rebate amount claimed: \_\_\_\_\_  
Name of Business Partner: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

**Contact information**

End User Company Name (print clearly): \_\_\_\_\_  
Contact Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Mailing address (if different): \_\_\_\_\_  
City: \_\_\_\_\_ County: \_\_\_\_\_  
Country: \_\_\_\_\_ Postcode: \_\_\_\_\_  
E-mail address: \_\_\_\_\_  
Daytime phone: \_\_\_\_\_

I certify by my signature that I am in compliance with the terms and conditions of this rebate offer, and that all of the information I have entered on this Rebate Request Form is accurate, complete, and in accordance with the rebate request instructions.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Name (please print): \_\_\_\_\_  
Title and Company name: \_\_\_\_\_