

2022 SPIFF Program

SPIFF Rules & Registration Form

Program Overview:

- Integra is offering a 2% SPIFF on approved commercial sales orders to select dealer personnel. Does not include orders through GSA, state contracts, other contracts or buying agreements.
- Fill out this form and email it to accounting@integraseating.com. You will be assigned a SPF# that will be emailed to you.
- Make sure your SPF# is on any SPIFF-approved Purchase Order that is placed with Integra from 1.1.2022 through 12.31.2022. Your Integra area rep will approve the SPIFF.
- A check will be issued to that sales person in the month following the invoice being paid. Checks will be sent to and distributed by your Integra area rep.

Program Rules:

1. Program Period – January 1, 2022 – December 31, 2022.
2. The 2% is figured on product only, not on other line item charges that may occur on the order.
3. Your Rep **MUST** approve the SPIFF for EACH Project/Order.
4. The SPIFF is only eligible on commercial sales orders at standard discounts, not on GSA, or any other contracts or buying agreements.
5. How to Enter: Simply fill out this one-time registration below along WITH the attached W9 Form and email to accounting@integraseating.com. A SPF# will be assigned and emailed to you.
6. Your SPF# **MUST** be on the SPIFF-approved Purchase Order when it is submitted to Integra, Inc. or before invoicing/shipping of order. Integra will not be able to process the SPIFF after invoicing.
7. Eligible recipients must be a representative from an authorized Integra dealer, 18 years or older, and a resident of the United States.
8. SPIFF payments will be paid only after the invoice is paid to Integra. The dealer's account must be current with Integra in order to qualify for Spiff program.
9. When necessary, Integra will issue a 1099 at the appropriate time and the recipient is responsible for any/all income tax liabilities.
10. By filling out and submitting this form for a SPF#, you are agreeing to all the rules of this program.

SPIFF Registration Form (fill out and email entire form to: accounting@integraseating.com)

Name: _____ Dealership: _____

Home Address: _____ Dealer City & State: _____

Home City: _____ State: _____ Zip: _____

Social Security # (required for all SPIFF payments): _____

Phone#: _____

Email address: _____

Signature: _____