

Redemption Form



To receive your redemption, please fill out this form completely. In order for your redemptions to be processed accurately, please include this form with each shipment of UPCs submitted.

School Name: _____

School Address: _____

City: _____

State: _____

Zip: _____

Coordinator name: _____

Coordinator phone: _____

Coordinator email: _____

Number of bags submitted: _____

Number of UPCs in each bag: _____

Total number of UPCs submitted: _____

Total number of UPCs x .05 cents = Total redemption amount: \$_____

By signing, I certify that I am the authorized Loaves 4 Learning Coordinator for my organization. I understand that giving false information to the Loaves 4 Learning Program may be considered fraudulent under the U.S. Mail Fraud Statutes (18 U.S.C. 1341 and 3142).

Name Signature Date

Please mail redemptions to:
Loaves 4 Learning
PO Box 6000
Clear Lake, MN 55319

A check will be mailed directly to your school. For questions regarding this program, please send them to: Loaves4Learning@letushelponline.com

