



ALL TILE INC.
BUILDING MATERIALS...AND RELATIONSHIPS

**HOLIDAY
HERO**

Signup Form

FAX

this completed form to
(847) 427-0765

Attn: Spiff Claim
Department

PLEASE PRINT CLEARLY.

Name: _____

This is your name as it will appear or currently appears on the All Tile debit card.

Company Name: _____

Email Address: _____

We will only email you if we have questions about your spiff claim, or if you so request.

Check here if you wish to receive your Holiday Hero spiff payout running total weekly via email.

**IF YOU HAVE AN ALL TILE DEBIT CARD ALREADY, STOP HERE.
IF YOU NEED AN ALL TILE DEBIT CARD, PLEASE CONTINUE.**

Street Address: _____

City, State & Zip: _____

Social Security Number:

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No credit check is ever conducted. This identification number is collected solely for tax purposes. Any individual participant whose earnings exceed \$600 during 2009 will receive a form 1099 documenting the income.

This signup form must be received by November 24, 2009.

This is to ensure that Holiday Hero spiff payouts can be made on December 11, 2009.