Annandale Distillery

Friends & Family Cask Purchase Commission - T&C's

Terms and Conditions

The Friends and Family Cask Purchase Incentive Programme will run from 1st July 2023 until 31st March 2024.

Staff are incentivised to 'Recommend' the purchase of a Cask of Annandale Single Malt to their Friends & Family.

Commission will be payable upon the successful purchase of either a Fresh fill or Mature Cask for those that recommend it to a Friend or Family member.

All Permanent employees at Annandale Distillery, The Globe & MMR are eligible for this scheme.

All employees MUST complete & submit the *Friends & Family Cask Purchase Form* (see below) to a member of our Cask team to verify their connection with the Friend or Family member.

Employee must complete the form with all the relevant Personal information for the Friend or Family member.

Friends & Family commission will only be payable upon invoices raised after 01/07/2023. No commission is payable upon casks purchased before this date.

Friends & Family commission is only payable once full payment has been received for the cask.

Friend & Family members must be aged 18 or over to purchase a cask.

Staff will receive the following commission for any cask purchase(s), successfully completed by Friends & Family, following a recommendation from a Staff member.

Cask type	Staff Commission	
MATURE CASKS		
Value - £15,000+	£600.00	
Value - £10,000+	£500.00	
Value - £5,000+	£400.00	

FRESH FILL CASKS	
Value - £10,000+	£500.00
Value - £5,000+	£400.00
Value - £3,000+	£200.00

^{*}Commission will be subject to regular income tax deductions.

Friends & Family Cask Purchase Form

Friend or Family Member Personal Detail	<u>ils</u>	
Title: Mr / Mrs / Miss / Ms / Other: *Delete as appropriate		
Male/Female		
As shown on your birth certificate or gender re *Delete as appropriate	ecognition certificate	
First Name/s: Last N	ame:	
Preferred First Name (known as): If different to First Name Date of Birth:/ DD / MM / YYYY		
Address:		
Post Code:		
Personal Email Address:		
Personal Phone Number:		
Nationality:	-	
STAFF DETAILS		
First Name/s: Last N	ame:	
Start Date:		
Position:		
Relationship to Purchaser:	Time Known:	
Signed Declaration:	Date:	