

Agent Information

Name _____
 City _____ State _____ ZIP Code _____
 Phone _____ Cell _____ Fax _____
 E-mail _____

Telemarketing

Preferred Demographics: County/ Zip Code: _____

Note: We will automatically go out a 30 mile radius from requested area. We pull 55-75 year olds, with an income of \$15k - \$60k.

* Terms and Conditions *

By signing this form you understand that this amount will be charged to your credit card today. Due to changing market conditions and your chosen county/zip codes, order fill time may vary.

Quantity	_____
Price per lead	x \$15.00
Total	_____

NO REFUNDS

Direct Mail

\$400 per 1,000 Total Order Amount _____

County(s) / Zips Wanted	Special Instructions

Credit Card Authorization

By signing below, I understand that ALB Insurance Marketing and its assignee hold no responsibility for, nor does it guarantee sales. ALB will only issue a refund for leads received in error or if the lead order cannot be filled. ALB error, which may be out of the purchase area, leads sent without a phone number or disconnected phone number. I understand the terms and conditions of this agreement.

Visa MasterCard V Code _____ Number _____ Exp.Date _____

Monthly Statement Mailing Address _____

City _____ State _____ ZIP Code _____

Signature _____ Date _____