

Transamerica Final Expense Lead Order Form

AGENT INFORMATION

Agent Name: _____ Agent #: _____

Email: _____ Phone #: _____ Cell #: _____

Address: _____ City/State/Zip: _____

ORDER INFORMATION

Requested Mail Date (week of)				
Quantity Requested				
State				
County				
Zip Codes requested (All orders are placed by zip code. No PO Boxes)				

DEMOGRAPHICS:

Age Range 45–85 (55–80 Recommended)		
Gender: M, F, Both		
Income Range (Please select Minimum and Maximum amounts)	Minimum HHI	Maximum HHI
	<input type="checkbox"/> \$0	<input type="checkbox"/> \$15,000
	<input type="checkbox"/> \$15,000	<input type="checkbox"/> \$20,000
	<input type="checkbox"/> \$20,000	<input type="checkbox"/> \$30,000
	<input type="checkbox"/> \$30,000	<input type="checkbox"/> \$40,000
	<input type="checkbox"/> \$40,000	<input type="checkbox"/> \$50,000
	<input type="checkbox"/> \$50,000	<input type="checkbox"/> \$75,000

Lead Territories are assigned on a first come, first served basis and no territories are guaranteed. Please complete the Credit Card Authorization below, so that your order can be placed.

I hereby authorize Transamerica Life Insurance Company to order lead mailers on my behalf.

Agent Signature: _____ Agent #: _____ Date: _____

Credit Card Type (Select One): MasterCard VISA Discover Credit Card Number: _____

Expiration Date: _____ 3-Digit Security Code (on back of card): _____

Address & Phone on file for card if different than above and home phone: _____

Approval: _____ Date Ordered: _____

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By signing this agreement, I understand the following:

- 1) Lead Territories are assigned on a first come, first served basis and no territories are guaranteed.
- 2) Leads are \$330/thousand.
- 3) The lead order cutoff is 12:00 noon ET each Wednesday. All orders in the system at cutoff will be mailed out the following Thursday, six business days later.
- 4) Allow at least two weeks after date of mail drop for lead response cards to begin arriving.
- 5) Must be under contract at Transamerica Life to order leads through this program.
- 6) You will be notified of the final mail quantity and total cost approximately one week before the leads are mailed out. You must give your approval in order to proceed. YOUR CREDIT CARD WILL BE CHARGED AT THIS TIME.

I hereby authorize Transamerica Life Insurance Company to order lead mailers on my behalf.

Agent Name: _____ Agent #: _____

Email: _____

Phone #: _____

Fax #: _____

Cell #: _____

Agent Signature: _____

Approval: _____ Date Ordered: _____