

REFERRALS for the Pre-Paid Legal Services, Inc. membership

Please take a few minutes to review the situations listed on the reverse side of this sheet. If someone you know might find it useful to have a Pre-Paid Legal Services membership to help them with these or any other legal problem, please list their names below and mail this sheet to me. Thank you!

Yes, please contact the following people who I believe would benefit from a Pre-Paid Legal Services membership. You have my permission to use my name as a reference.

Your Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____ E-mail: _____

People to contact:

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____ E-mail: _____

Why you think they would be interested: _____

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____ E-mail: _____

Why you think they would be interested: _____

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____ E-mail: _____

Why you think they would be interested: _____

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____ E-mail: _____

Why you think they would be interested: _____
