Client Focus Connections
241 Market Ave
Port Edwards, WI 54469
Office 877-692-3400 Fax 715-887-4039
Email cfc@wctc.net

_____
_____ Insurance
Address _____
City/State/Zip _____
Office _____ Fax _____
Email _____

Hi, my name is _____ . I'm calling on behalf of _____
With _____ Insurance.

We are contacting all of our customers this evening to find out if you carry term life insurance.

YES – That's great. Term Insurance is a simple and inexpensive way to protect your loved ones. _____ would like to offer you a comparison quote since _____ Insurance offers some very reasonable rates.

YES – I'd like to ask a few preliminary questions so _____ can be prepared.
How many adults and children are in the household?
And the ages of the adults?
Do either of the adults smoke?

NO – Are there any other insurance needs that _____ can help you with at this time?

Thank you and have a good evening.