



AGREEMENT

11626 Prosperous Drive • Odessa, FL 33556
 888.679.0255 • 727.375.1502
 FAX: 727.499.7999

Reverse Mortgage
 Direct Mail & Marketing

ORDER FORM

Client Name: _____ Company Name: _____
 Company Address: _____ City: _____ State: _____ Zip: _____
 Email address: _____ Phone: _____ Fax: _____

PACKAGES

DIRECT MAIL

- HECM
 #10 Window Package (RM-801)
 HYBRID
 6 X 9 Single Window (RM-802)

SEMINAR

- SELF MAILER (RM-803)
 6 X 9 Map/Wedding (RM-804)
 #10 Full Window (RM-805)

LIST SELECTION

- List #1 (with LTV) List #3
 List #2
 In Home Date(s): _____

AREA (COUNTIES) _____

QUANTITY	
Price per piece	
Additional cost (if applicable)	
AllPro CallCap.com	\$59.00 per month / 100 Minutes Free, \$.08 min. thereafter
TOTAL COST	

TERMS

To ensure that your mail will drop in a timely manner, payment is required 4 days before mailing date accompanied by a signed agreement – check or credit card accepted. By Client's signature hereon, he /she is representing that all written text, images, photographs, marks, insignias, logos or other graphics or artwork provided by Client is not subject to any legal restriction, including but not limited to, copyright, trademark or trade secret. Should any legal action be brought against ALLPRO Printing, because of its reproduction and/ or dissemination of any item provided by Client, Client shall indemnify ALLPRO Printing, and shall be responsible for all attorney's fees and costs associated with the defense of said legal action, including those fees and costs associated with enforcement of this indemnity provision. Venue for any action out of this Agreement shall be in Hillsborough County, Florida. This commitment is to serve as Client's written authorization for agency (AllPro Printing) to perform services and/or contact with suppliers for above described items on client's behalf. Client's signature also indicates an understanding of estimates, prices, terms and non-cancel ability of said terms and services. CLIENT'S SIGNATURE ALSO AUTHORIZES ALLPRO TO PRINT ALL MATERIALS WITH FINAL ART APPROVAL. This agreement also authorizes ALLPRO Printing to charge customers credit card for above services.

PAYMENT

METHOD OF PAYMENT	<input type="checkbox"/> Check / Cash	<input type="checkbox"/> MC/Visa	<input type="checkbox"/> American Express
Credit Card Number	Exp. Date:		
Name as it appears on credit card			
Credit Card address if different than above			

Customer Signature _____ Date _____

Check Velocity Service: Your check is welcome! If your check is returned for non-sufficient funds, you expressly authorize your account to be electronically debited or bank drafted for the amount of the check plus any applicable fees. The use of a check for payment is your acknowledgement and acceptance of this policy and its terms and conditions.

Thank You!