



DEAR PRIVATE MEMBERS,

(THE FOLLOWING IS *TIME SENSITIVE!!!*)



REFERRALS UNLIMITED (RU)
A MUTUAL ASSISTANCE PROCESS
DREAM VACATION SUITES

Our Philosophy That Is Summed Up As Follows:

WE truly believe that helping individuals and businesses to achieve **Personal Vacation Ownership, Independence, and Freedom...CAN ONLY...** be done through... **MENTORING...** and simply providing the **FACTS** that allow **YOU** to make rational, intelligent **CHOICES**. While we are processing your application for membership that will help resolve some of your personal, family and / or business vacation and travel requirements as well as, retirement, tax and estate planning concerns, I would like you to be doing some thinking concerning a problem I have and one in which I could use your help. I need to get in front of people like you on a favorable basis. As I mentioned, **this enables me to spend 95% of my time working for my clients and only 5% of my time looking for people to talk to.**

With your permission, let me leave with you this **name-gathering list**. Please use it to jot down **successful people** you know and for whom my work might have application. A good place **to start is with your business Rolodex or directory, then any Databases resources and your home telephone book.** (A side benefit to this process is it helps you update important information you use often). As to their qualification, I feel the **Three** most important are: **(1) Intelligent** - because I want them to understand what I'm talking about; next would be **(2) Responsible** - because it is important they care about the health and happiness of their families and businesses; **(3) Successful** -because if they need our products and services, they will be able to afford them over their lifetimes.

As to an introduction, I have found the most professional approach is a letter of introduction from you. In the letter it is helpful if you mention we have worked together and you have found some of my ideas to be profit-able and beneficial to your family and or your business. As a result, you feel your referral / associate / etc. should spend some time with me to determine if my work might apply in his / her situation. You are welcome

to choose a letter from one of the samples attached. You may edit one of these letters or write your own if you prefer. If you choose we will send our standard referral letter, which is included for your review.

As a specialist, Mr. JAMES S. DAVIS, Jr. (Jim) can show you "HOW TO" ... Own Your Vacations, Earn 5-10 times Or More With Your Assets, Turn non-producing assets (like dead home equity) into monthly income, reduce your liabilities, send your kids to college for free and hundreds of other benefits and services.

THANK YOU IN ADVANCE !!!

To Our Mutual Success,

James S. Davis, Jr.

President/CEO/Founder

Phone: 1.843.997.1800 & Fax: 1.301.248.2249

info@mentorservicesunlimited.com / www.mentorservicesunlimited.com

PS: PLEASE RETURN YOUR PERSONAL AND BUSINESS REFERRALS WITHIN THE NEXT 10 DAYS. THOSE OF YOU WHO WOULD LIKE ME TO PROVIDE A "PRIVATE SEMINAR" TO A GROUP, SIMPLY CALL ME AND WE CAN DEFINE WHAT WOULD BE PRESENTED, WHO COULD QUALIFY AND THE NUMBER OF FUTURE PARTICIPANTS WHO WILL NEED TO ATTEND. *REMEMBER WE PAY YOU A SUBSTANTIAL REFERRAL BONUS BASED ON THEIR INITIAL LOAN / DEPOSIT / PURCHASE AMOUNT!

PLEASE SEND ALL REFERRALS TO: JAMES S. DAVIS, JR. C/O

DREAM VACATION SUITES

7708 Locust Lane Fort Washington, Md. 20744

"Members Only Referral Program"

As a **DREAM VACATION SUITES** private member you are entitled to receive compensation for referring others to join our network. Each *Personal or Business Referral* you introduce to our Consortium of company businesses will instantly enroll you **"FOR FREE"** into our **Referrals Unlimited - Referral Bonus Checks - Passive Income Program**.

Money is made by you, our client, your customers and we get paid – to provide personal and business referrals. We also create corporate incentive programs. **We pay you** based on the level of participation each of your referrals join at, per business they choose to receive benefits and services from. (Please review the following link)

Simply stated, **YOU** our private member can reinvest these checks with in our Family of Companies or cash it and spend it for anything you choose!

Congratulations!

(PLEASE KEEP THESE FORMS FOR FUTURE REFERRALS) ©MSU RU 12.01.08

WE HAVE DESIGNED AN OUTSTANDING REWARDS PROGRAM FOR YOU AND YOUR REFERRALS WHO ATTEND OR WE PROVIDE OUR INFORMATION PRESENTATION TO. SUBSTANTIAL FINANCIAL AND BONUS CREDITS WILL BE AWARDED TO YOU WHICH CAN PAY YOUR MAINTENANCE FEE'S, RCI & I.I. EXCHANGE FEE'S, AIR LINE TICKETS, CRUISES, GOLF & SKI PACKAGES HOTEL & MOTEL ACCOMMODATIONS AND DOZEN'S OF ADDITIONAL OPTIONS AND BENEFITS YOU CAN CHOOSE FROM.....ENJOY!!!

THE PEOPLE PROCESS

The following questions will provide you with some ideas for a name-gathering list:

1. Who are the three **most successful business** people you know?
2. Who are the most successful business people **in any clubs or civic organizations** you belong to?
A) Country Club B) Hobbies C) Rotary D) Tennis E) Lions F) Golf
G) Chamber of Commerce H) Church or House of Worship I) (You specify:)
3. Who are other successful individuals who may serve on **Board of Directors of a bank, hospital,(i.e., etc)**
4. Who are the **wealthiest persons** you know?
5. Who are the successful business **owners in any industry association** you may belong to?
6. Who do you know who **has a business with 20 or more employees?**
7. Of all the people you know, who do you think **makes the most money?**
8. Who are your most successful **friends and relatives in your personal phone directory?**
9. Who are the **three suppliers you do the most business with?**
10. Who do you know who has **inherited substantial wealth?**
11. Who is the **Executor, Trustee or Guardian of your will?**
12. Who are the first three people **in your industry who come to mind?**
13. Who do you know who is the **owner or part - owner of a profitable business?**
14. Who do you know **who seems to have a good future?**
15. Who are the **most successful doctor and dentist** you know?
16. Of all the **salespeople you know, whom do you consider the most successful?**
17. Who are the most successful persons **you know in your occupation?**
18. **If you were in my profession, who are the first three people you would call on?**
19. Who are your **suppliers, distributors, and or wholesalers?**
20. Who **has or is about to retire** that may have a substantial pension or profit sharing plan distribution?
21. To whom do **you send Christmas or birthday cards?**
22. **Employment opportunity in our industry (Remember we have (9) Companies.)**
23. **General description (please provide) not covered above**
24. **Individuals who could / would enjoy a financial, investment and tax reducing planning review and or a debt consolidation / equity loan / line of credit (No obligation, of course).**

25. SINCE SOME OF OUR BENEFITS AND SERVICES / FINANCIAL PROGRAMS ARE QUALIFIED AS BUSINESS INCENTIVES, EMPLOYEE BONUSES AND PERKS , TAX DEDUCTIBLE VEHICLES, ETC. LIST ALL WHOM YOU FEEL COULD BENEFIT.

★ Please list any special information or relationship (i.e., brother, business associate, best friend, maid of honor at our wedding, etc.)

ANY SUGGESTIONS YOU MAY HAVE TO IMPROVE OUR REFERRAL AND NAME GATHERING SYSTEM IS GREATLY APPRECIATED. THANK YOU. (PLEASE ADD COMMENTS HERE) ↻

(PLEASE KEEP THIS FORM FOR FUTURE REFERRALS)

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(PROTOCOLY / SCAN & EMAIL OR FAX & RETURN THIS FORM

IF YOU HAVE SUGGESTIONS...THANK YOU)

THE PEOPLE PROCESS (Continued)

↻ **SAMPLE LETTERS OF INTRODUCTION** ↻

LETTER #1

I would like to introduce you to my/our personal and business Mentor and Specialist, Mr. JAMES S. DAVIS, Jr. He can show you HOW TO ... *Own Your Life*. He recently did some personal and/or corporate planning for us. His firm also specialize in preparing a current financial profile of the dollars I/we have been spending and the assets we have accumulated and how they are losing value compared to alternative vehicles currently on the market. I found this work to be most unusual and very helpful .The time we invested was SHORTand the benefits are substantial, but most of all ,...***JIM SHOWED US HOW HIS OTHER PRIVATE MEMBERS HAVE SAVED AND EVEN EARNED TEN'S OF THOUSANDS OF \$\$\$\$\$ AND OUR FAMILY/ BUSINESS CAN AND SHOULD DO THE SAME!***PLUS, HE SHOWED US HOW-TO NOW take control of our lives and use several of their companies (PPSP) Programs, Products, Services And Projects to our advantage.

When Jim first called me, I was impressed with his sincere desire to serve and felt it would be worth a few minutes of my time to meet and speak with him. I can only tell you that, as a result of my initial meeting, I have had an opportunity to re-evaluate, in an extremely professional way, my entire personal and corporate financial structure as it pertains to our requirements.

I would definitely recommend Jim to you as being honest, straight forward, extremely well qualified and always there when you need him. He has asked me if I knew anyone who might need the type of work he does and I have suggested he and or his personal assistant give you a call. I would consider it a personal favor if you would take the time to speak with him. I promise you ... he will not pressure you in any way. I think afterwards you will agree, it has been time well spend.

LETTER #2

I would like to introduce you to my / our Financial Advisor and Specialist, Mr. JAMES S. DAVIS, Jr. He can show you HOW TO ... ***Take Control Of Your Lives And Own Your Future***. He recently did some personal and corporate planning for us. His firm also specializes in preparing a current financial profile of the dollars

I/we have been spending and the assets we have accumulated and how they are losing value compared to alternative vehicles currently on the market. I found this work to be most unusual and very helpful .The time we invested was **SHORT**....and the benefits are substantial but most of all***JIM SAVED OUR FAMILY & BUSINESS TEN'S OF THOUSANDS OF \$\$\$\$ PLUS WE HAVE EARNED A SUBSTANUAL RETURN WELL BEYOND ANYTHING WE HAVE EVER RECEIVED IN THE PAST.***

Knowing how busy you are, I would not recommend that you see him unless I thought it would be worthwhile for you. I've asked Jim to give you a call on my personal recommendation. I can assure you spending a few minutes with him so he can graphically illustrate his services will be time well spent.

LETTER #3

I would like to introduce you to my/our personal friend and a person whom we have come to believe has become a Mentor to our family and even has positively influenced our business. Mr. JAMES S. DAVIS, Jr. Jim is a specialist and he can show you HOW TO ... ***Re-evaluate your goals and dreams in order to achieve them in a timely manor.*** He recently did some personal and corporate planning for us and his firm also specialize in preparing a current financial profile of the dollars I/we have been spending and the assets we have accumulated and how they are losing value compared to alternative vehicles currently on the market. I found this work to be most unusual and very helpful .The time we invested was **SHORT. ...And** the benefits are substantial but most of all

JIM SHOWED US HOW HIS PRIVATE MEMBERS HAVE EARNED AND SAVED THEIR COMPANIES AND FAMILIES TEN'S OF THOUSANDS OF \$\$\$\$\$\$\$\$!PLUS HE SHOWED US HOW-TO NOW VACATION IN 1ST CLASS RESORTS SUITES AND VILLA'S WORLDWIDE FOR LESS THAN THE COST OF THE ECONOLODGE MOTEL RATES!!!

I can definitely recommend Jim to you as being conscientious and qualified. I would also add that his approach and analysis produce results that cannot be compared with other programs I have seen. After weighing all our options and because of the superior recommendations that had been made to me, I decided to work with him. I have been very pleased with the unique and interesting job that was done.

He called on me without any up front obligations on my part and made a thorough financial analysis.

In short, any time you spend with Jim will not be wasted. It is my suggestion that you invest a few minutes required for Jim to explain his work.

LETTER #4

I would like to personally introduce you to my/our friend and specialist, Mr. JAMES S. DAVIS, Jr. He can show you HOW TO ... ***Use your current assets to earn remarkable returns with little if any risks. Our own "DEAD EQUITY" sitting in our home was not earning a dime and Jim showed us how his private members have simply reallocated poorly performing assets into other vehicles that have out preformed any investment I/we have ever owned in our past. Jim even showed us how to Own Your VACATIONS for life instead of renting them and throwing all that money down the drain.***

He recently did some personal and corporate vacation planning for us. His firm also specialize in preparing a current financial profile of the dollars I/we have been spending and how our assets are not able to grow based on the current economy, I found this work to be most unusual and very helpful .The time we invested was **SHORT**and the benefits are substantial but, most of all ...***JIM SAVED OUR FAMILY / BUSINESS TEN'S OF THOUSANDS OF \$\$\$\$\$\$\$\$! We also started earning great returns by simply following his proven results based programs.***

.... Plus, he showed us How-To **NOW** Vacation in 1st class resorts suites and villa's worldwide for **less** than the cost of the Econolodge motel rates!

When Jim first called, I was not interested in having a retired financial / estate planner talk to me about vacation ownership. However, he was persistent so I agreed to spend a few minutes to hear what he had

to say. Since then Jim helped (spouse) and me get our financial / travel affairs in order, (or companies) a task we've been trying to do for years. Jim is able to put complex concepts into simple terms, he provided straightforward explanations and he got things done. I have asked him to call you and I would consider it a personal favor if you would spend a few minutes listening to what he can do for someone like yourself and your business. I suggested that Jim call you. I think it would be worth a few minutes of your time to hear his ideas. It has been for me.

LETTER # 5

I would like to introduce you to my/our Personal Advisor and Mentor who has over 34 years experience in several fields. As a specialist, Mr. JAMES S. DAVIS, Jr. (Jim) can show you **"HOW TO" ... Own Your Vacations, Earn 5-10 times Or More With Your Assets, Turn non producing assets (like dead home equity) into monthly income, reduce your liabilities, send your kids to college for free and hundreds of other benefits and services.** He recently did some personal and corporate planning for us. His firm also specialize in preparing a current financial profile of the dollars I/we have been spending and saving, I found this work to be most unusual and very helpful .The time we invested was **SHORT**and the benefits are substantial but, most of all

JIM HAS SAVED OUR FAMILY / BUSINESS TEN'S OF THOUSANDS OF \$\$\$\$\$\$\$\$ IN LOSSES AND HAS SHOWN US HOW WE CAN EARN OUTSTANDING RETURNS.PLUS, HE SHOWED US HOW-TO... NOW VACATION IN 1ST CLASS RESORTS SUITES AND VILLA'S WORLDWIDE FOR LESS THAN THE COST OF THE ECONO LODGE MOTEL RATES!!

Jim has done an outstanding job for me. As a result of this analysis, I have accepted several ideas that are potentially monetarily advantageous I have found Jim to be knowledgeable, creative and conscientious and his conclusions to be objective.

It occurred to me that this service might be of interest to you. I suggest you spend a few minutes with Jim to learn the nature of his work. I believe you will find the time well spent as I know of no one who works so thoroughly.

NOTE: Simply **PRINT** or **TYPE** the information and list **all** the **appropriate number and letter code(s)**, THEN E-MAIL OR **MAIL WITHIN 10 DAYS** in our envelope or **FAX to (301) 248.2249** THEN PLEASE (**CIRCLE ONE**) # 1 2 3 4 5 → Referral Letter To Be Sent By Us: **OR CHECKBOX** **HERE** ⇒ including your own personal letter of introduction **OR** our standard referral letter will be sent.

THANK YOU & WELCOME TO OUR FAMILY!

EXAMPLE: BLUE & RED COLORS

REFERRAL'S NAME:(S) JOHN & MARY HANCOCK
BUSINESS Referrals, List Company Name (s) (HERE): MASS. STATE CAPITAL & A B C CORP
 MAILING ADDRESS : Home 1ST Bus or 2nd Bus E-Mail : yourmentor@cox.net Cell # (222)-555-5555
Street: 123 PRESIDENTS DRIVE **City** BOSTON **State** MASS. **Zip** 22222
Home:# (222)-555-1111 **Bus.#** (333)-444-4444 **Spouse's Bus.#** (444)-666-7777
Fax # (555)-222-7777 **Occupation(s):** STATE GOVERNER **Spouse** PRESIDENT / CEO
Number & Letter Codes (LIST ALL THAT APPLY): 1,2-A&G,3,7,12,15,24,&25 ★ co-workers & stock holder
CB **NI** **DNO** **APPT.** **DAY** **DATE** **@** **:** **AM/PM** **SET BY:**

“MEMBERS ONLY - REFERRAL PROGRAM”

*** (PLEASE COMPLETE & RETURN THESE FORMS)***

MEMBER SERVICES NAME: 1st Rep _____ 2nd Rep: _____

REFERRER → YOUR NAME (S) _____ / _____

Member # _____ or SS # _____

BUSINESS Clients List Company Name(s) (Here;) _____

✓ My MAILING ADDRESS : Home 1ST Bus or 2nd Bus E-Mail: _____

Street _____ City _____ State _____ Zip _____

Home # _____ Bus.# _____ Spouse's Bus.# _____

Fax # _____ Cell # _____ Cell# _____

Occupation(s): _____ Spouse _____

(IF KNOWN, list who referred you here) Referred By: _____

OFFICE USE	Referral's	Follow - Up	Mkt. Rep.
New Members	Rec`d Date	Date Client	Employee #
Date Enrolled	From Client	Re-Contacted	Rep J. DAVIS, JR.

THANK YOU & WELCOME TO OUR FAMILY

Return to sender after completed

(PLEASE KEEP THIS FORM FOR FUTURE REFERRALS) ©MSU RU 12.01.08

*** (The following are Referred by: _____)

#1. NAME:(S) _____ 1ST Member # or SS# _____

BUSINESS Clients List Company Name(s) (HERE;) _____

✓ MAILING ADDRESS : Home 1ST Bus or 2nd Bus E-Mail: _____

Street _____ City _____ State _____ Zip _____

Home # _____ Bus.# _____ Spouse's Bus.# _____

Fax # _____ Cell# _____ Cell# _____

Occupation (s): _____ Spouse _____

NUMBER & LETTER CODES (LIST ALL THAT APPLY): _____ ★

CB NI DNO APPT. DAY DATE @ : AM/PM SET BY: _____

*** (The following are Referred by: _____)

#2. NAME:(S) _____ *1ST Member # or SS#* _____

BUSINESS Clients List Company Name(s) (HERE;) _____

MAILING ADDRESS : Home *1ST Bus* *or 2nd Bus* E-Mail :

Street _____ City _____ State _____ Zip _____

Home # _____ Bus.# _____ Spouse's Bus.# _____

Fax # _____ Cell# _____ Cell# _____

Occupation (s): _____ Spouse _____

NUMBER & LETTER CODES (LIST ALL THAT APPLY): _____ ★

CB NI DNQ APPT. DAY DATE @ : AM/PM SET BY: _____

#3. NAME:(S) _____ *1ST Member # or SS#* _____

BUSINESS Clients List Company Name(s) (HERE;) _____

MAILING ADDRESS : Home *1ST Bus* *or 2nd Bus* E-Mail :

Street _____ City _____ State _____ Zip _____

Home # _____ Bus.# _____ Spouse's Bus.# _____

Fax # _____ Cell# _____ Cell# _____

Occupation (s): _____ Spouse _____

NUMBER & LETTER CODES (LIST ALL THAT APPLY): _____ ★

CB NI DNQ APPT. DAY DATE @ : AM/PM SET BY: _____

#4. NAME:(S) _____ *1ST Member # or SS#* _____

BUSINESS Clients List Company Name(s) (HERE;) _____

MAILING ADDRESS : Home *1ST Bus* *or 2nd Bus* E-Mail :

Street _____ City _____ State _____ Zip _____

Home # _____ Bus.# _____ Spouse's Bus.# _____

Fax # _____ Cell# _____ Cell# _____

Occupation (s): _____ Spouse _____

NUMBER & LETTER CODES (LIST ALL THAT APPLY): _____ ★

CB NI DNQ APPT. DAY DATE @ : AM/PM SET BY: _____

*** (The following are Referred by: _____)

#5 . NAME:(S) _____ *1ST Member # or SS#* _____

BUSINESS Clients List Company Name(s) (HERE;) _____

MAILING ADDRESS : Home *1ST Bus* *or 2nd Bus* E-Mail :

Street _____ City _____ State _____ Zip _____

Home # _____ Bus.# _____ Spouse's Bus.# _____

Fax # _____ Cell# _____ Cell# _____

Occupation (s): _____ Spouse _____

NUMBER & LETTER CODES (LIST ALL THAT APPLY): _____ ★

CB NI DNQ APPT. DAY DATE @ : AM/PM SET BY: _____

#6 . NAME:(S) _____ *1ST Member # or SS#* _____

BUSINESS Clients List Company Name(s) (HERE;) _____

MAILING ADDRESS : Home *1ST Bus* *or 2nd Bus* E-Mail :

Street _____ City _____ State _____ Zip _____

Home # _____ Bus.# _____ Spouse's Bus.# _____

Fax # _____ Cell# _____ Cell# _____

Occupation (s): _____ Spouse _____

NUMBER & LETTER CODES (LIST ALL THAT APPLY): _____ ★

CB NI DNQ APPT. DAY DATE @ : AM/PM SET BY: _____

#7 . NAME:(S) _____ *1ST Member # or SS#* _____

BUSINESS Clients List Company Name(s) (HERE;) _____

MAILING ADDRESS : Home *1ST Bus* *or 2nd Bus* E-Mail :

Street _____ City _____ State _____ Zip _____

Home # _____ Bus.# _____ Spouse's Bus.# _____

Fax # _____ Cell# _____ Cell# _____

Occupation (s): _____ Spouse _____

NUMBER & LETTER CODES (LIST ALL THAT APPLY): _____ ★

CB NI DNQ APPT. DAY DATE @ : AM/PM SET BY: _____

*** (The following are Referred by: _____)

#8 . NAME:(S) _____ *1ST Member # or SS#* _____

BUSINESS Clients List Company Name(s) (HERE;) _____

MAILING ADDRESS : Home *1ST Bus* *or 2nd Bus* E-Mail :

Street _____ City _____ State _____ Zip _____

Home # _____ Bus.# _____ Spouse's Bus.# _____

Fax # _____ Cell# _____ Cell# _____

Occupation (s): _____ Spouse _____

NUMBER & LETTER CODES (LIST ALL THAT APPLY): _____ ★

CB NI DNQ APPT. DAY DATE @ : AM/PM SET BY: _____

#9 . NAME:(S) _____ *1ST Member # or SS#* _____

BUSINESS Clients List Company Name(s) (HERE;) _____

MAILING ADDRESS : Home *1ST Bus* *or 2nd Bus* E-Mail :

Street _____ City _____ State _____ Zip _____

Home # _____ Bus.# _____ Spouse's Bus.# _____

Fax # _____ Cell# _____ Cell# _____

Occupation (s): _____ Spouse _____

NUMBER & LETTER CODES (LIST ALL THAT APPLY): _____ ★

CB NI DNQ APPT. DAY DATE @ : AM/PM SET BY: _____

#10 . NAME:(S) _____ *1ST Member # or SS#* _____

BUSINESS Clients List Company Name(s) (HERE;) _____

MAILING ADDRESS : Home *1ST Bus* *or 2nd Bus* E-Mail :

Street _____ City _____ State _____ Zip _____

Home # _____ Bus.# _____ Spouse's Bus.# _____

Fax # _____ Cell# _____ Cell# _____

Occupation (s): _____ Spouse _____

NUMBER & LETTER CODES (LIST ALL THAT APPLY): _____ ★

CB NI DNQ APPT. DAY DATE @ : AM/PM SET BY: _____

*** (The following are Referred by: _____)

#11. NAME:(S) _____ *1ST Member # or SS#* _____

BUSINESS Clients List Company Name(s) (HERE;) _____

MAILING ADDRESS : Home *1ST Bus* *or 2nd Bus* E-Mail :

Street _____ City _____ State _____ Zip _____

Home # _____ Bus.# _____ Spouse's Bus.# _____

Fax # _____ Cell# _____ Cell# _____

Occupation (s): _____ Spouse _____

NUMBER & LETTER CODES (LIST ALL THAT APPLY): _____ ★

CB NI DNQ APPT. DAY DATE @ : AM/PM SET BY: _____

#12. NAME:(S) _____ *1ST Member # or SS#* _____

BUSINESS Clients List Company Name(s) (HERE;) _____

MAILING ADDRESS : Home *1ST Bus* *or 2nd Bus* E-Mail :

Street _____ City _____ State _____ Zip _____

Home # _____ Bus.# _____ Spouse's Bus.# _____

Fax # _____ Cell# _____ Cell# _____

Occupation (s): _____ Spouse _____

NUMBER & LETTER CODES (LIST ALL THAT APPLY): _____ ★

CB NI DNQ APPT. DAY DATE @ : AM/PM SET BY: _____

#13. NAME:(S) _____ *1ST Member # or SS#* _____

BUSINESS Clients List Company Name(s) (HERE;) _____

MAILING ADDRESS : Home *1ST Bus* *or 2nd Bus* E-Mail :

Street _____ City _____ State _____ Zip _____

Home # _____ Bus.# _____ Spouse's Bus.# _____

Fax # _____ Cell# _____ Cell# _____

Occupation (s): _____ Spouse _____

NUMBER & LETTER CODES (LIST ALL THAT APPLY): _____ ★

CB NI DNQ APPT. DAY DATE @ : AM/PM SET BY: _____

*** (The following are Referred by: _____)

#14. NAME:(S) _____ *1ST Member # or SS#* _____

BUSINESS Clients List Company Name(s) (HERE;) _____

MAILING ADDRESS : Home *1ST Bus* *or 2nd Bus* E-Mail :

Street _____ City _____ State _____ Zip _____

Home # _____ Bus.# _____ Spouse's Bus.# _____

Fax # _____ Cell# _____ Cell# _____

Occupation (s): _____ Spouse _____

NUMBER & LETTER CODES (LIST ALL THAT APPLY): _____ ★

CB NI DNQ APPT. DAY DATE @ : AM/PM SET BY: _____

#15. NAME:(S) _____ *1ST Member # or SS#* _____

BUSINESS Clients List Company Name(s) (HERE;) _____

MAILING ADDRESS : Home *1ST Bus* *or 2nd Bus* E-Mail :

Street _____ City _____ State _____ Zip _____

Home # _____ Bus.# _____ Spouse's Bus.# _____

Fax # _____ Cell# _____ Cell# _____

Occupation (s): _____ Spouse _____

NUMBER & LETTER CODES (LIST ALL THAT APPLY): _____ ★

CB NI DNQ APPT. DAY DATE @ : AM/PM SET BY: _____

#16. NAME:(S) _____ *1ST Member # or SS#* _____

BUSINESS Clients List Company Name(s) (HERE;) _____

MAILING ADDRESS : Home *1ST Bus* *or 2nd Bus* E-Mail :

Street _____ City _____ State _____ Zip _____

Home # _____ Bus.# _____ Spouse's Bus.# _____

Fax # _____ Cell# _____ Cell# _____

Occupation (s): _____ Spouse _____

NUMBER & LETTER CODES (LIST ALL THAT APPLY): _____ ★

CB NI DNQ APPT. DAY DATE @ : AM/PM SET BY: _____

*** (The following are Referred by: _____)

#17. NAME:(S) _____ 1ST Member # or SS# _____

BUSINESS Clients List Company Name(s) (HERE;) _____

MAILING ADDRESS : Home 1ST Bus or 2nd Bus E-Mail :

Street _____ City _____ State _____ Zip _____

Home # _____ Bus.# _____ Spouse's Bus.# _____

Fax # _____ Cell# _____ Cell# _____

Occupation (s): _____ Spouse _____

NUMBER & LETTER CODES (LIST ALL THAT APPLY): _____ ★

CB NI DNQ APPT. DAY DATE @ : AM/PM SET BY: _____

#18. NAME:(S) _____ 1ST Member # or SS# _____

BUSINESS Clients List Company Name(s) (HERE;) _____

MAILING ADDRESS : Home 1ST Bus or 2nd Bus E-Mail :

Street _____ City _____ State _____ Zip _____

Home # _____ Bus.# _____ Spouse's Bus.# _____

Fax # _____ Cell# _____ Cell# _____

Occupation (s): _____ Spouse _____

NUMBER & LETTER CODES (LIST ALL THAT APPLY): _____ ★

CB NI DNQ APPT. DAY DATE @ : AM/PM SET BY: _____

#19. NAME:(S) _____ 1ST Member # or SS# _____

BUSINESS Clients List Company Name(s) (HERE;) _____

MAILING ADDRESS : Home 1ST Bus or 2nd Bus E-Mail :

Street _____ City _____ State _____ Zip _____

Home # _____ Bus.# _____ Spouse's Bus.# _____

Fax # _____ Cell# _____ Cell# _____

Occupation (s): _____ Spouse _____

NUMBER & LETTER CODES (LIST ALL THAT APPLY): _____ ★

CB NI DNQ APPT. DAY DATE @ : AM/PM SET BY: _____

*** (The following are Referred by: _____)

#20. NAME:(S) _____ 1ST Member # or SS# _____

BUSINESS Clients List Company Name(s) (HERE;) _____

MAILING ADDRESS : Home 1ST Bus or 2nd Bus E-Mail :

Street _____ City _____ State _____ Zip _____

Home # _____ Bus.# _____ Spouse's Bus.# _____

Fax # _____ Cell# _____ Cell# _____

Occupation (s): _____ Spouse _____

NUMBER & LETTER CODES (LIST ALL THAT APPLY): _____ ★

CB NI DNQ APPT. DAY DATE @ : AM/PM SET BY: _____

#21. NAME:(S) _____ 1ST Member # or SS# _____

BUSINESS Clients List Company Name(s) (HERE;) _____

MAILING ADDRESS : Home 1ST Bus or 2nd Bus E-Mail :

Street _____ City _____ State _____ Zip _____

Home # _____ Bus.# _____ Spouse's Bus.# _____

Fax # _____ Cell# _____ Cell# _____

Occupation (s): _____ Spouse _____

NUMBER & LETTER CODES (LIST ALL THAT APPLY): _____ ★

CB NI DNQ APPT. DAY DATE @ : AM/PM SET BY: _____

#22. NAME:(S) _____ 1ST Member # or SS# _____

BUSINESS Clients List Company Name(s) (HERE;) _____

MAILING ADDRESS : Home 1ST Bus or 2nd Bus E-Mail :

Street _____ City _____ State _____ Zip _____

Home # _____ Bus.# _____ Spouse's Bus.# _____

Fax # _____ Cell# _____ Cell# _____

Occupation (s): _____ Spouse _____

NUMBER & LETTER CODES (LIST ALL THAT APPLY): _____ ★

CB NI DNQ APPT. DAY DATE @ : AM/PM SET BY: _____

*** (The following are Referred by: _____)

#23. NAME:(S) _____ *1ST Member # or SS#* _____

BUSINESS Clients List Company Name(s) (HERE;) _____

MAILING ADDRESS : Home *1ST Bus* *or 2nd Bus* E-Mail : _____

Street _____ City _____ State _____ Zip _____

Home # _____ Bus.# _____ Spouse's Bus.# _____

Fax # _____ Cell# _____ Cell# _____

Occupation (s): _____ Spouse _____

NUMBER & LETTER CODES (LIST ALL THAT APPLY): _____ ★ _____

CB NI DNQ APPT. DAY DATE @ : AM/PM SET BY: _____

#24. NAME:(S) _____ *1ST Member # or SS#* _____

BUSINESS Clients List Company Name(s) (HERE;) _____

MAILING ADDRESS : Home *1ST Bus* *or 2nd Bus* E-Mail : _____

Street _____ City _____ State _____ Zip _____

Home # _____ Bus.# _____ Spouse's Bus.# _____

Fax # _____ Cell# _____ Cell# _____

Occupation (s): _____ Spouse _____

NUMBER & LETTER CODES (LIST ALL THAT APPLY): _____ ★ _____

CB NI DNQ APPT. DAY DATE @ : AM/PM SET BY: _____

#25. NAME:(S) _____ *1ST Member # or SS#* _____

BUSINESS Clients List Company Name(s) (HERE;) _____

MAILING ADDRESS : Home *1ST Bus* *or 2nd Bus* E-Mail : _____

Street _____ City _____ State _____ Zip _____

Home # _____ Bus.# _____ Spouse's Bus.# _____

Fax # _____ Cell# _____ Cell# _____

Occupation (s): _____ Spouse _____

NUMBER & LETTER CODES (LIST ALL THAT APPLY): _____ ★ _____

CB NI DNQ APPT. DAY DATE @ : AM/PM SET BY: _____

*** (The following are Referred by: _____)

#26. NAME:(S) _____ *1ST Member # or SS#* _____

BUSINESS Clients List Company Name(s) (HERE;) _____

MAILING ADDRESS : Home *1ST Bus* *or 2nd Bus* E-Mail :

Street _____ City _____ State _____ Zip _____

Home # _____ Bus.# _____ Spouse's Bus.# _____

Fax # _____ Cell# _____ Cell# _____

Occupation (s): _____ Spouse _____

NUMBER & LETTER CODES (LIST ALL THAT APPLY): _____ ★

CB NI DNQ APPT. DAY DATE @ : AM/PM SET BY: _____

#27. NAME:(S) _____ *1ST Member # or SS#* _____

BUSINESS Clients List Company Name(s) (HERE;) _____

MAILING ADDRESS : Home *1ST Bus* *or 2nd Bus* E-Mail :

Street _____ City _____ State _____ Zip _____

Home # _____ Bus.# _____ Spouse's Bus.# _____

Fax # _____ Cell# _____ Cell# _____

Occupation (s): _____ Spouse _____

NUMBER & LETTER CODES (LIST ALL THAT APPLY): _____ ★

CB NI DNQ APPT. DAY DATE @ : AM/PM SET BY: _____

#28. NAME:(S) _____ *1ST Member # or SS#* _____

BUSINESS Clients List Company Name(s) (HERE;) _____

MAILING ADDRESS : Home *1ST Bus* *or 2nd Bus* E-Mail :

Street _____ City _____ State _____ Zip _____

Home # _____ Bus.# _____ Spouse's Bus.# _____

Fax # _____ Cell# _____ Cell# _____

Occupation (s): _____ Spouse _____

NUMBER & LETTER CODES (LIST ALL THAT APPLY): _____ ★

CB NI DNQ APPT. DAY DATE @ : AM/PM SET BY: _____

*** (The following are Referred by: _____)

. NAME:(S) _____ *1ST Member # or SS#* _____

BUSINESS Clients List Company Name(s) (HERE;) _____

MAILING ADDRESS : Home *1ST Bus* or *2nd Bus* E-Mail : _____

Street _____ City _____ State _____ Zip _____

Home # _____ Bus.# _____ Spouse's Bus.# _____

Fax # _____ Cell# _____ Cell# _____

Occupation (s): _____ Spouse _____

NUMBER & LETTER CODES (LIST ALL THAT APPLY): _____ ★ _____

CB NI DNQ APPT. DAY DATE @ : AM/PM SET BY: _____

. NAME:(S) _____ *1ST Member # or SS#* _____

BUSINESS Clients List Company Name(s) (HERE;) _____

MAILING ADDRESS : Home *1ST Bus* or *2nd Bus* E-Mail : _____

Street _____ City _____ State _____ Zip _____

Home # _____ Bus.# _____ Spouse's Bus.# _____

Fax # _____ Cell# _____ Cell# _____

Occupation (s): _____ Spouse _____

NUMBER & LETTER CODES (LIST ALL THAT APPLY): _____ ★ _____

CB NI DNQ APPT. DAY DATE @ : AM/PM SET BY: _____

. NAME:(S) _____ *1ST Member # or SS#* _____

BUSINESS Clients List Company Name(s) (HERE;) _____

MAILING ADDRESS : Home *1ST Bus* or *2nd Bus* E-Mail : _____

Street _____ City _____ State _____ Zip _____

Home # _____ Bus.# _____ Spouse's Bus.# _____

Fax # _____ Cell# _____ Cell# _____

Occupation (s): _____ Spouse _____

NUMBER & LETTER CODES (LIST ALL THAT APPLY): _____ ★ _____

CB NI DNQ APPT. DAY DATE @ : AM/PM SET BY: _____

Duplicate this Referral Form and fill in the # . Thank You !!! ***Return to sender after completed***