## LEAD CARD



THE JOCO JOHNSON COUNTY

Attendee's Name(s): \_\_\_\_\_\_ Address: Phone(s): Best Time to Call: Email: \_\_\_\_\_ Budget in Mind: \$\_\_\_\_\_ Appointment Date for Estimate: Estimated Start Date: \_\_\_\_\_ Follow Up (if no appt set): \_\_\_\_\_ Preferred Method of Contact:

()REMODEL

Circle One: Fri Sat Sun

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Personal Info:			
Rate Interest: Low 1 2 3	4	5	High
Sales Rep:			

## LEAD CARD



THE JOCO JOHNSON COUNTY

Attendee's Name(s):

Perso	ona	l Ir	nfo:			
Rate	Inte	ere	st:			
Low	1	2	3	4	5	High

Sales Rep:

Address:				
Phone(s):				
Best Time to Call:				
Email:				
Budget in Mind: \$				
Appointment Date for Estimate:				
Estimated Start Date:				
Follow Up (if no appt set):				
Preferred Method of Contact:				