TRY MSIS TODAY

NO COMMITMENTS . NO CONTRACTS

\$100 CASH

Per Referral that Results in a Sale!

MSIS, Inc. works exclusively with Medicare Beneficiaries.

Referring	Business /	Contact	Info
(Phoi	ne Number and/o	or Email)	

Referring Business Representative:

Address _____

City_____State____ Zip_____

Submit This Referral by:

FAX 229.244.2625 EMAIL referrals@msis.us

Call 229.249.5234 or ask for Janet Sears



www.msis.us Agent Use Only.

Excluded States:

AK, GA, MA, MS, MT, ND, NM, UT, WI, WV

Our Program pays \$25.00 PER LEAD in these states:

FL, KY, LA, NY, OH, SC, SD, TN, TX, VA

Referred Client / Contact Info

(Phone Number and/or Email)

Date of Birth: //

Client Name:

Address _____

City_____State____Zip____

Offered Insurance Company:

Yes, I have spoken to this client and they are interested in talking to an MSIS agent about their options for a Medicare Supplement.