



SETTLEMENT QUOTE SHEET

Agent; Mark Adams The NoteBroker Web: usanotebroker.com

Mail form to: The Notebroker ATTN; Mark Adams PO Box 45 East Lyme Ct. 06333
or Email the form to: notesbroker@aol.com

Name of Insurance company paying the Settlement _____

State Client Lives in ? _____

What Type of Settlement ?

____ Car Accident ____ Personal Injury ____ Wrongful Death ____

Was this Work related? Y or N IF YES, WE CAN NOT DO THIS DEAL - Stop Here

Have you sold payments before? Y or N if Yes, to what company _____

How are the payments paid out? __ Monthly __ Quarterly __ Annually __ Combination

Monthly payments amount _____ Paid on what day of Month _____

Do Payments increase? Y or N if yes. Date and amount of increase _____

If client receives lump sum payments, when are they due and how much?

Date _____ Amount _____ Date _____ Amount _____

Date _____ Amount _____ Date _____ Amount _____

Date _____ Amount _____ Date _____ Amount _____

Date _____ Amount _____ Date _____ Amount _____

How many payments would you like to sell? _____ How much would you like to get selling these _____