

To Get Your Direct Response Campaign Going ASAP!

Please be advised that the information you provide is *very* important for the accurate and *quick* production of your campaign. Please provide information for the points below and return to us so that the process can begin. *You must complete this form for each item, and each location; do not combine information unless you are putting more than one location on a piece.* **Please fax back the completed form to 954/971-8225.** Please print *clearly and exactly* as you want it to appear on your piece(s). Thanks!

Your Funeral Home/Cemetery Name: _____

Your Name: _____ Ph.# _____ Fax# _____

Today's Date: _____ Cell# _____ E-mail _____

#1 Item: Direct Mail Newspaper Insert Door Hanger Display Ad List Only

#2 Creative Theme Preference: _____

#3 Your Selected Zip Codes:

Requested Age Demo _____

Other Demos : _____

Ok To Mail In Numeric Sequence (if not see #4)

#4 Zip Codes Mailing Sequence:

Priority Sequence Required, Shown Below

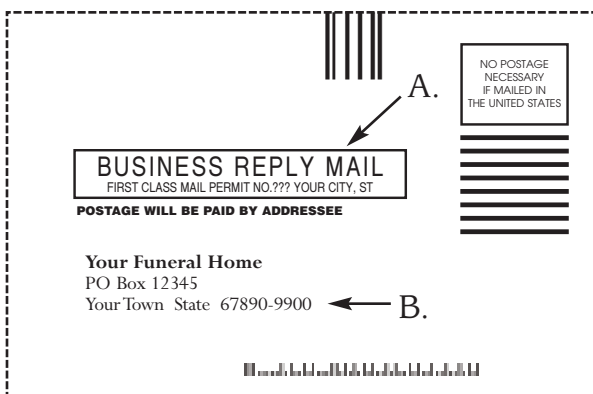
1. _____	6. _____	11. _____	16. _____
2. _____	7. _____	12. _____	17. _____
3. _____	8. _____	13. _____	18. _____
4. _____	9. _____	14. _____	19. _____
5. _____	10. _____	15. _____	20. _____

#5 Business Reply Post Card Information:

All direct response pieces require a Customer Response Card that will be mailed back to you. Be sure to establish a business reply account with your local post office, if you don't already have one. (You will also need to consider the questions you want on the other side; see page 2.) If you need further instructions, please contact us.

EXAMPLE

Actual size: 5.5" X 3.5"



A. NEED YOUR BUSINESS REPLY MAIL FIRST CLASS PERMIT NUMBER AND TOWN AND STATE OF ORIGINATION

Permit No. _____ Orig. _____
Your City State

B. RETURN ADDRESS FOR YOUR REPLY CARD:

Location: _____

Address: _____

ZIP Code: _____ - _____

IMPORTANT: The Post Office requires a special 4-digit zip extension especially for business reply post cards. (see B above). It usually starts with a 9. This number is assigned to *just* your account. It is not the regular four digits common to that zip code for everyone. Be sure it's correct or lead cards won't come back. Ask for the Business Reply Manager at your local post office; that person is usually the one most familiar with business reply mail and setting up accounts.



#6 Location(s) On Piece, Customizing Request:

Please List As You Want Them To Appear On Your Printed Piece:

FUNERAL HOME/CEMETERY NAME(S) • LOCATION(S) • ADDRESS(ES)/PHONE NUMBER(S) • WEBSITE, ETC.

Using The Example Of The Theme You Prefer, Let Us Know What Changes Need To Be Made (You can send on a separate sheet if you need more room) . _____

#7 Questions On Return Card: Please check the boxes to indicate your choices or add your own.

Do you have preplanned funeral arrangements? Yes No

Do you own cemetery property? Yes No

I'm Interested In:

Free Good Faith Estimate

Free _____ (incentive here)

Discount Savings

Cremation Options

Veteran Benefits

Local Burial

Mausoleum

Transferring Existing Arrangements

I Prefer These Questions/Statements
(Instead of, or in addition to the ones at left)

#8 Incentive: _____ (i.e. Planning Guide, Angel Pin, Living Will, etc.)

#9 Mailing Schedule: (Minimum of 1,000 pieces per drop; can do more, over whatever time period you prefer.)

Describe Your Preferred Mailing Schedule: _____

#10 Follow-up Mail/Phone List Option: Yes No With Phones* No Phones

List data is same names we are mailing to, in same sequence. **Send to E Mail:** _____

#11 *FTC ID/SAN# (Required by law if you want phone numbers where available on your follow-up list, scrubbed against "Do Not Call List", valid for 31 days)

FTC SAN ID #: _____ Expiration Date: _____

Name & phone no. of person who registered: _____ Ph: _____

Location name that registered: _____

Phone Area Codes Registered: _____

#12 Send Billing To:

Name: _____

Location Name: _____

Address: _____

City/St/Zip: _____

Phone: _____ Fax: _____ E Mail: _____

Please Note: Your piece will be created based on the information you provide. Proofs of your piece for review and corrections will be provided. Your authorized final approval will be needed prior to ordering/ printing. Thank you for the opportunity.