

SETTLEMENT QUOTE SHEET

Agent Name _____ Phone _____ Fax _____ Date _____

E-mail _____

Name of Insurance Company paying the settlement? _____

State client lives in? _____

What type of settlement?

___ car accident ___ personal injury ___ wrongful death ___ other, explain _____

Was this work related? Y or N **If yes, we cannot do this deal -- stop here**

Have you sold payments before? Y or N **If yes, to what company?** _____

How are payments paid out?

___ monthly ___ quarterly ___ annually ___ combination

Monthly Payment 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 money would you like to get by selling these payments?