

# LEAD CARD

JACKSONVILLE  
**HOME  
+PATIO  
SHOW**  
 SPRING  FALL

Circle One:  
Thur Fri Sat Sun

Personal Info:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Rate Interest:  
Low 1 2 3 4 5 High

Sales Rep: \_\_\_\_\_

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: \_\_\_\_\_

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