



Preferred Business & Contractors Association

REFERRAL SLIP

Date: _____
From: _____
To: _____
Referral: _____
Address: _____
City, State, Zip: _____
Phone Number: _____ Best time to call: __AM __PM
Email Address: _____
___ Given your card ___ Told them you would call
Comments:



On a scale of 1-10 (10 being the most likely to meet with prospect) What would this person rate? _____



Professional Business & Contractors Association

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