

# LEAD SLIP

Please fill out your info to learn how home equity may help your retirement goals.

## Contact Information

Full Name: \_\_\_\_\_ Email: \_\_\_\_\_

Phone: \_\_\_\_\_ Address: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

## Retirement Goals / Interests (check all that apply)

Supplement retirement income     Reduce monthly expenses     Stay in my home longer

Move closer to family/friends     Plan for healthcare or long-term care

Other: \_\_\_\_\_

## Best Way to Contact Me:

Email     Phone     Mail

Additional Notes / Questions: \_\_\_\_\_

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