

## ***Structured Settlement / Annuity / Lottery Quote Request Form***

First name \_\_\_\_\_ Last name \_\_\_\_\_

Address \_\_\_\_\_ Apt /Unit # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone number \_\_\_\_\_ Cell phone \_\_\_\_\_ Fax \_\_\_\_\_

E-Mail address \_\_\_\_\_

How much lump sum cash do you need now? \$ \_\_\_\_\_

Name of the State agency, company, or insurance provider making payments to you now? \_\_\_\_\_

### **Type of Payment**

- |   |  |                                  |
|---|--|----------------------------------|
| <input type="checkbox"/> Pre Settlement | <input type="checkbox"/> Structured Settlement | <input type="checkbox"/> Annuity |
| <input type="checkbox"/> Lottery        | <input type="checkbox"/> Casino Winnings       |                                  |

How much is your payment that you currently receive? \$ \_\_\_\_\_

Your current payment is received..... ☐ Monthly ☐ Quarterly ☐ Annually

Date of your first payment \_\_\_\_\_ Date of Final payment \_\_\_\_\_

Your next 3 payments are due.....

Due Date \_\_\_\_\_ Amount \$ \_\_\_\_\_

Due Date \_\_\_\_\_ Amount \$ \_\_\_\_\_

Due Date \_\_\_\_\_ Amount \$ \_\_\_\_\_

**What are your current needs? (Why would you like to sell your payment stream?)**

*Complete the form and return via fax to our offices. You will receive a call from one of our underwriters within 24 hours of submission.*