

Security National

Family of Life Companies



HOW DID I DO?

Your Name: _____

Phone Number: _____

- | | | |
|--|------------------------------|-----------------------------|
| Did I make you feel comfortable? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Are you happy with the arrangements we put in place today? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Did I answer all of your questions? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Would you recommend me to friends, relatives, and neighbors? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

WHO DO YOU KNOW?

Would you mind doing me a favor? We want to help other families put arrangements in place like you have today. I would appreciate any recommendations of **friends, relatives, and neighbors** that I could contact to see if they may or may not be interested in learning more about what we offer.

Name	Relationship	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____