

Term Life No-obligation Quote Card

For a no obligation quote simply complete and return this card to your local Farm Credit office.

Applicant Information

Name _____

Address _____

City _____

State _____ Zip _____

Amount of insurance to quote \$ _____

Plan type: 10 year 15 year 20 year

25 year 30 year

Date of birth _____ Sex: Male Female

Day phone _____

Evening phone _____

Cell phone _____

Fax _____

E-mail Address _____

Are you a tobacco/nicotine user? yes no

Please send quote via:

e-mail fax mail phone

Farm Credit

Life

Co-Applicant Information

Name _____

Address _____

City _____

State _____ Zip _____

Amount of insurance to quote \$ _____

Plan type: 10 year 15 year 20 year
 25 year 30 year

Date of birth _____ Sex: Male Female

Day phone _____

Evening phone _____

Cell phone _____

Fax _____

E-mail Address _____

Are you a tobacco/nicotine user? yes no

Please send quote via:

e-mail fax mail phone

Life Insurance from



Farm Credit Services
OF MID-AMERICA

1-800-444-FARM

www.e-farmcredit.com