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## Agency Referral Form

To refer a potential agent please complete as much information as possible and fax it to 800-209-0120 or email to [info@lgpf.com](mailto:info@lgpf.com) subject 'Agency Referral'.

Thank you in advance for your referral and we will be in touch shortly to let you know how it went.

### Agent Information

Your Name: \_\_\_\_\_ Date: \_\_\_\_\_

Your Agency: \_\_\_\_\_

E-mail address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

### Referral Information

Referral Name: \_\_\_\_\_

E-mail address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Referral Agency Name: \_\_\_\_\_

Comments: \_\_\_\_\_

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