

Lead Type: Health  
Date Received: 2/13/2007

Contact Information:

Name: Erik Jensen  
Address: [REDACTED]  
City: [REDACTED]  
State: CO  
Zip: [REDACTED]  
Primary Phone: [REDACTED] Day, Evening  
Alternate Phone:  
Email: onenonesuch@yahoo.com

Insured Information:

|          | Sex        | DOB        | Height     | Weight     |
|----------|------------|------------|------------|------------|
|          | -----      | -----      | -----      | -----      |
| Primary: | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] |
| Spouse:  | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] |
| Child 1: | [REDACTED] | [REDACTED] | [REDACTED] | [REDACTED] |
| Child 2: |            |            |            |            |
| Child 3: |            |            |            |            |
| Child 4: |            |            |            |            |

Insureds that currently use tobacco: None  
Currently Insured: Yes  
If insured, carrier name: United Health Care  
Self Employed: Yes  
Occupation:

Policy Information:

Full Time Student: No  
Duration of coverage needed: Not certain  
Diabetes: No  
Date coverage needed:

Health Conditions, Medications, and Other Information:

Is anyone to be covered currently pregnant? No

Other Health Conditions and Information:  
[REDACTED]

Referrer:

http://www.mostchoice.com/

Keywords:

IP Address

208.49.110.34

CLIENT.HitCount

4

CLIENT.LastVisit

{ts '2007-02-13 10:56:41'}

CLIENT.TimeCreated

{ts '2007-02-13 10:56:23'}

Lead Source:

MC Health

Lead Number:

6502821

**Lead Type: Life Insurance**  
**Date Received: 2/20/2007**

**Contact Information:**

**Name: Danny Wilson**  
**Address:** [REDACTED]  
**City:** [REDACTED]  
**State: CO**  
**Zip: 80203**

**Phone:** [REDACTED]  
**Alternate Phone:**  
**Email: daniellwilkie@hotmail.com**

**Insured Information:**

**Sex:** [REDACTED]  
**Age/DOB:** [REDACTED]  
**Height:** 8  
**Weight: 135**  
**Tobacco: No**

**Quote #1: Amount: 100000 Type: Not Sure**  
**Quote #2: Amount: 0 Type:**

**Own or Rent Home: Own**

**Spouse:**

**Age/DOB:** [REDACTED]  
**Height: 5'10**  
**Weight: 150**  
**Tobacco: No**

**Quote #1: Amount: 175000 Type: 30 years**  
**Quote #2: Amount: 0 Type:**

**Health Problems and other information:**

**Referrer:**

<http://www.mostchoice.com/>

**Keywords:**

**IP Address**

**208.49.110.34**

**CLIENT.HitCount**

**4**

**CLIENT.LastVisit**

**{ts '2007-02-20 14:43:02'}**

**CLIENT.TimeCreated**

**{ts '2007-02-20 14:42:33'}**

**Lead Source:**

**MostChoice.com**

**Lead Number:**

**6512537**

**Lead Type: Auto Insurance**  
**Date Received: 2/20/2007**

**Contact Information:**

**Name: Danny Wilkie**  
**Address:** [REDACTED]  
**City:** [REDACTED]  
**State: CO**  
**Zip: 80203**  
**Primary Phone:** [REDACTED]  
**Alternate Phone:**  
**Email: daniellewilkie@hotmail.com**

**Number of Vehicles: 1**  
**Number of Drivers: 0**

**Currently Insured/Insured last 30 days: Yes**  
**If yes, carrier: Allstate County Mutual**  
**Expiration Date: 02/02/2007**  
**Time with carrier: 2 years 5 months**  
**Time continuously insured: 4 years 6 months**

**Multiple Policy Discount Interest: Yes**

**Credit Rating: Excellent,Excellent**  
**Judgements,bankruptcy or liens: No**  
**Repossessions, Charge-Offs, or Collections: No,No**  
**Have Health Insurance: Yes**  
**Current Residence Ownership: Own**  
**How long at Current Residence: 2 years 3 months**  
**How long at Previous Residence: 2 years 3 months**

**Liability coverage for all vehicles:**  
**0**

**Vehicle 1:**  
**Year: 1999**  
**Make: Ford**  
**Model: Tuarus**  
**Zip Code: 80203**  
**Comprehensive Deductible: \$50**  
**Collision Deductible: \$100**  
**Vehicle Primary Use: Commute Work**  
**Number of Commuting Days: 5**  
**Number of Commuting Miles: 10**  
**Number of Miles Driven Annually: 10000**  
**Is the Vehicle Leased or Owned: No**

**Referrer:**

<http://www.mostchoice.com/>

**Keywords:**

**IP Address**

**208.49.110.34**

**CLIENT.HitCount**

**10**

**CLIENT.LastVisit**

**{ts '2007-02-20 14:46:29'}**

**CLIENT.TimeCreated**

**{ts '2007-02-20 14:42:33'}**

**Lead Source:**

**MostChoice.com**

**Lead Number:**

**6512551**

**Lead Type: Life Insurance**  
**Date Received: 3/2/2007**

**Contact Information:**

**Name: Mobile Shozy**

**Address:** [REDACTED]

**City:** [REDACTED]

**State: CO**

**Zip: 80439**

**Phone:** [REDACTED]

**Alternate Phone:** [REDACTED]

**Email: graydog@aol.com**

**Insured Information:**

**Sex: Male**

**Age/DOB:** [REDACTED]

**Height: 5'6**

**Weight: 160**

**Tobacco: No**

**Quote #1: Amount: 0**

**Type: 30 Year Term Life Insurance**

**Quote #2: Amount: 0**

**Type:**

**Own or Rent Home: Rent**

**Health Problems and other information:**

**Referrer:**

<http://www.mostchoice.com/>

**Keywords:**

**IP Address**

**208.49.110.34**

**CLIENT.HitCount**

**3**

**CLIENT.LastVisit**

**{ts '2007-03-02 17:46:45'}**

**CLIENT.TimeCreated**

**{ts '2007-03-02 17:46:38'}**

**Lead Source:**

**MostChoice.com**

**Lead Number:**

**6528187**

**Lead Type: Life Insurance**  
**Date Received: 3/2/2007**

**Contact Information:**

**Name: Jennifer Haag**  
**Address:** [REDACTED]  
**City:** [REDACTED]  
**State: CO**  
**Zip: 80113**

**Phone:** [REDACTED]  
**Alternate Phone:**  
**Email: jennifer\_haag@yahoo.com**

**Insured Information:**

**Sex: Female**  
**Age/DOB:** [REDACTED]  
**Height: 5'8**  
**Weight: 165**  
**Tobacco: No**

**Quote #1: Amount: 175000 Type: 30 Year Term Life Insurance**  
**Quote #2: Amount: 0 Type:**

**Own or Rent Home: Own**

**Health Problems and other information:**

**Referrer:** Filed 09/26/2007 Page 5 of 7

<http://www.mostchoice.com/>

**Keywords:**

[REDACTED]

|                    |                            |
|--------------------|----------------------------|
| IP Address         | 208.49.110.34              |
| CLIENT.HitCount    | 4                          |
| CLIENT.LastVisit   | {ts '2007-03-02 17:51:41'} |
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| Lead Source:       | MC Life                    |
| Lead Number:       | 6528193                    |

**Lead Type: Life Insurance**  
**Date Received: 03/02/2007**

**Contact Information:**

**Name: Aaron Smith**  
**Address:** [REDACTED]  
**City:** [REDACTED]  
**State: CO**  
**Zip: 80133**

**Phone: (720) 154-8765**  
**Alternate Phone:**  
**Email: aaron@sparkywire.com**

**Insured Information:**

**Sex: Male**  
**Age/DOB:** [REDACTED]  
**Height: 6'0**  
**Weight: 200**  
**Tobacco: No**

**Quote #1: Amount: 625000 Type: 30 Year Term Life Insurance**  
**Quote #2: Amount: 0 Type:**

**Own or Rent Home: Own**

**Health Problems and other information:**

**Referrer:**

[REDACTED]

**Keywords:**

[REDACTED]

|                    |                            |
|--------------------|----------------------------|
| IP Address         | 208.49.110.34              |
| CLIENT.HitCount    | 8                          |
| CLIENT.LastVisit   | {ts '2007-03-02 18:02:57'} |
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| Lead Source:       | MC Insurance Leads         |
| Lead Number:       | 6528202                    |

**Lead Type: Life Insurance**  
**Date Received: 05/18/2007**

**Contact Information:**  
**Name: Test Tester**  
**Address: 555 Nowhere St**  
**City: Lost**  
**State: MN**  
**Zip: 55391**

**Phone: (612) 200-2000**  
**Alternate Phone:**  
**Email:**

**If replacing a policy, current carrier:**

**Insured Information:**  
**Sex: Male**  
**Age/DOB:**  
**Height: 5'11&quot;**  
**Weight: 180**  
**Tobacco: No**  
**Medical Conditions:**

**Quote #1: Amount: 500000 Type: 30 Year Term Life Insurance**  
**Quote #2: Amount: 0 Type:**

**Own or Rent Home:**

**Other information:**

**Referrer:**

[Redacted Referrer Information]

**Keywords:**

[Redacted Keywords Information]

|                    |                            |
|--------------------|----------------------------|
| IP Address         | 208.49.110.34              |
| CLIENT.HitCount    | 4                          |
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| CLIENT.TimeCreated | {ts '2007-05-18 18:25:01'} |
| Lead Source:       | MC Life                    |
| Lead Number:       | 6630081                    |