

# REFERRAL FAX FORM



Date: \_\_\_\_\_ Time: \_\_\_\_\_ Pages: \_\_\_\_\_

To: **PartnerRewards**

From: \_\_\_\_\_

Fax: **1-866-898-8899**

Fax: ( ) \_\_\_\_\_

Phone: ( ) \_\_\_\_\_

Priority Service Call: \_\_\_\_\_



Please call the customer below about checks by Deluxe for Microsoft Dynamics®. I have spoken with the person and they wish to be contacted by Deluxe.

Contact Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Email Address: \_\_\_\_\_

Software Used:  Microsoft Dynamics® GP  Microsoft Dynamics® SL  Microsoft Dynamics® NAV

Software Version: \_\_\_\_\_

Best Date/Time to Contact Client: \_\_\_\_\_

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

## PartnerRewards Feedback

### Thank You for Your Referral!

The result of the call was:

- |   |   |
|---|---|
| <input type="checkbox"/> Closed sale                  | <input type="checkbox"/> Unable to reach by phone after ____ attempts |
| <input type="checkbox"/> Requested Sample/Price Quote | <input type="checkbox"/> Mailed Information                           |
| <input type="checkbox"/> Not interested at this time  | <input type="checkbox"/> Other _____                                  |
| <input type="checkbox"/> Left message with contact    |   |

We appreciate your referrals and look forward to helping your clients with business forms and supplies.