



WEEKLY SALES REPORT

AGENT: _____ WEEK ENDING (SUNDAY): _____

PLEASE INCLUDE PAGE 1 OF EACH APPLICATION

FAX WEEKLY SALES REPORT TO (714) 729-0605 BY 10:00 AM EVERY MONDAY

Applicant Name	Amount Submitted	Annual Target Premium	Carrier	Date Paramed Scheduled	Paramed Company	Lead Source

NOTES: _____