



## Private Money Investor Inquiry Form

DATE: \_\_\_\_\_

Contact Info		
First Name	Last Name	
Address		
City	State	ZIP
Mailing Address		
City	State	ZIP
Phone	Phone (alt.)	
Email	Best Time to Contact	

Investment Criteria
Property Types:
Location(s):
Additional:

Funds
Approximate Amount:
Source of Funds:

Comments/Questions
Please use this space to ask any questions or provide any additional information you feel relevant:

Referral Info
Please tell us how you heard about us?

MGR looks forward to reviewing your investment inquiry. Please submit this completed form by email, fax, or mail at your earliest convenience. We will be in touch shortly to discuss our investment opportunities further.

Office Use Only:

Assign Account No: \_\_\_\_\_

Completed by: \_\_\_\_\_

Enter in TMO: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Add to VR Contacts: \_\_\_\_\_