

MATRIX Solutions and Security, LLC

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Fax: 443-262-9699 Website: www.go-matrix.com

Dear _____,

We would like to take a moment and thank you for choosing Matrix to provide you with your home security. Our company is committed to offer you the best services and most competitive prices in the industry. We value your business and look forward to providing you service in the future.

In order to finish your client file we need additional information. If you could please take a moment to complete the bottom of this letter and send it back to us, we will be happy to send your alarm certificate to you so you may receive any insurance discounts you are due.

Thank you for you time and feel free to contact us if you have any questions.

Sincerely,

Benjamin Schreiber
President, Matrix Solutions and Security, LLC.

*PLEASE BE ADVISED THAT IF FOR ANY REASON YOU WISH TO DISCONTINUE YOUR MONITORING WE WILL HAVE TO FORWARD THE IMFORMATION TO YOUR INSURANCE COMPANY SO THEY CAN UPDATE YOUR FILE.

POLICY HOLDER: _____

HOMEOWNER INSURANCE CARRIER: _____

ADDRESS OF INSURANCE CARRIER: _____

INSURANCE AGENT NAME: _____

PHONE NUMBER OF INSURANCE AGENT: _____

POLICY NUMBER: _____

SIGNATURE OF POLICY HOLDER: _____