

800 # PHONE OPERATORS SCRIPT

1. THANK YOU FOR CALLING LORILLARD. MAY I HAVE YOUR PERSONAL I.D. NUMBER PLEASE? _____.

2. ARE YOU 21 YEARS OF AGE OR OLDER? YES _____ NO _____

3. IS YOUR CURRENT ADDRESS THE SAME AS THE ONE AT WHICH YOU RECEIVED OUR OFFER? YES _____ NO _____

* ADDRESS TAKEN

ADDRESS CHANGE _____

4. YOUR PHONE NUMBER PLEASE _____.

5. WHICH LORILLARD BRAND WOULD YOU LIKE FOR YOUR FREE CARTON:

KENT

FILTER KING

FILTER 100s

KENT III

FILTER KING

FILTER 100s

KENT GOLDEN LIGHTS

FILTER KING

FILTER 100s

MENTHOL KING

MENTHOL 100s

NEWPORT

KING

100s

Box

TRUE

FILTER KING

FILTER 100s

MENTHOL KING

MENTHOL 100s

6. WHICH BRAND OF CIGARETTES DO YOU SMOKE MOST OFTEN? _____.

WHAT LENGTH? REGULAR _____, 100MM _____, 120MM _____

IS THAT A MENTHOL _____ OR NON-MENTHOL _____

IS THAT A LIGHT _____ OR ULTRA-LIGHT _____

THANK YOU, YOUR FREE CARTON OF (NAME BRAND SELECTED) WILL ARRIVE SHORTLY, COMPLIMENTS OF LORILLARD.

DISCONNECT CALL: OPERATOR I.D. _____.

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