

Contact Information

Name	_ Company Name		
Address	City	State Zip	
Phone	Email		
Web Address	Years in Operat	tion	
About Your Business			
What is your annual revenue goal?			
How many locations do you have and where	•		
Is your company growing or expanding?			
If you are a nonprofit, what is your annual de	evelopment revenue g	goal?	
Describe your mission and values.			

Describe some of the services you offer.
Describe your branding.
Outline your community outreach efforts.
Do you track your community efforts? Who is in charge of managing these relationships?
If you are a corporation, about how much do you give back to the community annually?
What are your biggest frustrations and challenges you are facing in achieving your goals?
Do you have high staff turnover? Do you feel your employees are motivated?
What incentives do you provide employees?
What are the top (3) advantages of being a part of your company? 1

What are your biggest weaknesses?		
What would you say your staff would say needs to be changed?		
How Can We Help You		
What is your main motivation for reaching out to us?		
What opportunities and challenges can we help you to solve with your strategy, building a plan, staffing, employee motivation, raising money, planning an event, etc.		
What services would you need?		
When would you like us to start? And for how long?		
What is your budget for our monthly services?		
Who would be our main point of contact?		